

Pg 1 of 94
McPHILLIPS, ROBERTS & DEANS, PLC

CERTIFIED PUBLIC ACCOUNTANTS

TOWN POINT CENTER, SUITE 1100
NORFOLK, VIRGINIA 23510

POST OFFICE BOX 1180

NORFOLK, VIRGINIA 23501-1180

MEMBERS

AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

VIRGINIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

NATIONAL ASSOCIATED
CERTIFIED PUBLIC
ACCOUNTING FIRMS

(757) 640-7190

FAX (757) 640-7297

ANDREW COHEN & RITA COHEN
3750 JEFFERSON BOULEVARD
VIRGINIA BEACH, VA 23455

DEAR ANDREW AND RITA:

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF YOUR 2006 INCOME TAX RETURNS AS
FOLLOWS...

2006 1040 U.S. INDIVIDUAL INCOME TAX RETURN
2006 VIRGINIA INCOME TAX RETURN

THE ORIGINAL OF EACH RETURN SHOULD BE DATED, SIGNED AND FILED IN
ACCORDANCE WITH THE FILING INSTRUCTIONS ATTACHED TO THE COPY OF THE
RETURN. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

THE RETURNS WERE PREPARED PRIMARILY FROM DATA FURNISHED TO US.
BEFORE SIGNING THE RETURNS, YOU SHOULD REVIEW THE STATED INCOME,
DEDUCTIONS, DEPENDENTS, ETC., TO ENSURE THAT THERE ARE NO OMISSIONS OR
MISSTATEMENTS.

UPON AN AUDIT OF THE RETURNS, REQUESTS MAY BE MADE FOR SUPPORTING
DOCUMENTATION. THEREFORE, WE RECOMMEND THAT YOU RETAIN ALL PERTINENT
RECORDS.

THE CONTRIBUTION YOU ARE CLAIMING TO YOUR TRADITIONAL IRA FOR 2006 IS \$
624.

TO ENSURE THAT YOUR IRA CONTRIBUTION IS ALLOWABLE, \$ 624. MUST BE
DEPOSITED TO YOUR ACCOUNT NO LATER THAN APRIL 17, 2007.

THE CONTRIBUTION YOUR SPOUSE IS CLAIMING TO THEIR TRADITIONAL IRA FOR 2006
IS \$ 4,000.

PLEASE NOTE THAT IF YOU HAVE CLAIMED AN IRA DEDUCTION IN THE RETURN,
IT MUST BE FULLY FUNDED NO LATER THAN APRIL 17, 2007. ANY OTHER
PENSION OR PROFIT SHARING CONTRIBUTION MUST BE FULLY FUNDED NO LATER
THAN THE DUE DATE OF THE RETURN INCLUDING EXTENSIONS.

WE SINCERELY APPRECIATE THIS OPPORTUNITY TO SERVE YOU. PLEASE CONTACT
US IF YOU HAVE ANY QUESTIONS OR IF WE MAY BE OF FURTHER ASSISTANCE.

VERY TRULY YOURS,

McPHILLIPS, ROBERTS & DEANS, PLC

CERTIFIED PUBLIC ACCOUNTANTS

MEMBERS

TOWN POINT CENTER, SUITE 1100
NORFOLK, VIRGINIA 23510

POST OFFICE BOX 1180

AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

VIRGINIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

NATIONAL ASSOCIATED
CERTIFIED PUBLIC
ACCOUNTING FIRMS

NORFOLK, VIRGINIA 23501-1180

(757) 640-7190

FAX (757) 640-7297

ANDREW COHEN & RITA COHEN
INSTRUCTIONS FOR FILING FORM
1040

U.S. INDIVIDUAL INCOME TAX RETURN FOR 2006

SIGNATURE..

THE ORIGINAL RETURN SHOULD BE SIGNED (USE FULL NAME) AND DATED ON
PAGE 2 BY THE TAXPAYER AND SPOUSE.

PAYMENT OF TAX..

A CHECK OR MONEY ORDER PAYABLE TO THE "UNITED STATES TREASURY"
IN THE AMOUNT OF \$33,238. SHOULD BE ENCLOSED WITH THE RETURN. YOUR
SOCIAL SECURITY NUMBER AND "2006 FORM 1040" SHOULD BE WRITTEN ON YOUR
CHECK OR MONEY ORDER.

FILING..

FILE YOUR SIGNED RETURN BY APRIL 17, 2007 WITH:

INTERNAL REVENUE SERVICE CENTER
P.O. BOX 105017
ATLANTA, GA 30348-5017

PLEASE NOTE THAT IF YOU HAVE CLAIMED AN IRA DEDUCTION IN THE RETURN,
IT MUST BE FULLY FUNDED NO LATER THAN APRIL 17, 2007. ANY OTHER
PENSION OR PROFIT SHARING CONTRIBUTION MUST BE FULLY FUNDED NO LATER
THAN THE DUE DATE OF THE RETURN INCLUDING EXTENSIONS.

MAILING..

YOUR RETURN SHOULD BE MAILED BY EITHER REGISTERED OR CERTIFIED
MAIL, WITH THE SENDER'S RECEIPT POSTMARKED TO PROVE MAILING BEFORE
THE DUE DATE.

CARRYOVERS TO 2007
 =====

	REGULAR TAX -----	ALTERNATIVE MINIMUM TAX -----
SHORT-TERM CAPITAL LOSS		
LONG-TERM CAPITAL LOSS		
UNRECAPTURED NET SEC. 1231 LOSSES		
OFFICE-IN-HOME/VACATION HOME EXPENSES		
CONSERVATION EXPENSES (SCH. F)		
SEC. 179 EXPENSE		
DEPLETION		
PASSIVE ACTIVITY LOSS	24,719.	24,511.
INVESTMENT INTEREST EXPENSE	NONE	NONE
AT-RISK		
AT-RISK NONDEDUCTIBLE EXPENSE		
SEC. 911 FOREIGN HOUSING COST DEDUCTION		
100% - CHARITABLE CONTRIBUTION DEDUCTION		
50% - CHARITABLE CONTRIBUTION DEDUCTION		
30% - CHARITABLE CONTRIBUTION DEDUCTION		
SPECIAL 30% - CHARITABLE CONTRIBUTION DEDUCTION		
20% - CHARITABLE CONTRIBUTION DEDUCTION		
FOREIGN TAX CREDIT		
TOTAL GENERAL BUSINESS CREDITS		
INVESTMENT TAX CREDIT		
WORK OPPORTUNITY CREDIT		
QUALIFIED RAILROAD TRACK MAINTENANCE		
RESEARCH CREDIT		
LOW-INCOME HOUSING CREDIT		
DISABLED ACCESS CREDIT		
ENHANCED OIL RECOVERY CREDIT		
EMPOWERMENT ZONE EMPLOYMENT CREDIT		
INDIAN EMPLOYMENT CREDIT.....		
CREDIT FOR EMPLOYER S.S. TAX ON CERTAIN TIPS		
WELFARE TO WORK CREDIT		
RENEWABLE ELECTRICITY PRODUCTION CREDIT		
HURRICANE KATRINA EMPLOYEE RETENTION		
EMPLOYER-PROVIDED CHILD CARE SERVICES CREDIT		
SMALL EMPLOYER PENSION PLAN START UP COSTS		
BIODIESEL FUELS		
LOW SULFUR DIESEL FUEL PRODUCTION		
DISTILLED SPIRITS		
PRIOR YEAR CARRYOVERS		
MINIMUM TAX CREDIT		

ANDREW COHEN & RITA COHEN

**Two Year Comparison
2006 to 2005**

Description	2006	2005	Difference
Gross Income			
Wages, salaries, tips, etc.	4,624.	3,977.	647.
Taxable interest	2,816.	1,769.	1,047.
Ordinary dividends	67,639.	35,221.	32,418.
Taxable refunds, credits, or offsets of state and local income taxes	5,633.	6,944.	-1,311.
Alimony received			
Business income or (loss)	-18,544.	704,836.	-723,380.
Capital gain or (loss)	407,589.	246,730.	160,859.
Other gains or (losses)			
IRA distributions, pensions and annuities	10,176.		10,176.
Rent and Royalty Income			
Partnership and S Corporation Income	NONE	NONE	NONE
Estate and Trust Income			
REMIC			
Farm income or (loss)			
Taxable social security benefits and unemployment compensation			
Other income		-59.	59.
Total income	479,933.	999,418.	-519,485.
Adjustments to Gross Income			
Archer MSA deduction (Educator expenses)			
Certain business expenses of reservists			
Health savings account deduction			
Moving expenses			
One-half of self-employment tax		14,994.	-14,994.
Self-employed SEP, SIMPLE, and qualified plans		42,000.	-42,000.
Self-employed health insurance deduction		2,820.	-2,820.
Penalty on early withdrawal of savings			
Alimony paid			
IRA deduction	4,000.	NONE	4,000.
Student loan interest deduction			
Jury duty pay you gave to your employer			
Domestic production activities deduction (Tuition & fees deduction)			
Other adjustments			
Total adjustments	4,000.	59,814.	-55,814.
Adjusted Gross Income	475,933.	939,604.	-463,671.

ANDREW COHEN & RITA COHEN

Two Year Comparison 2006 to 2005

Description	2006	2005	Difference
Itemized Deductions			
Medical and dental	NONE	NONE	NONE
Taxes	22,021.	40,435.	-18,414.
Interest	3,221.	12,091.	-8,870.
Contributions	5,090.	5,525.	-435.
Casualty or theft losses			
Miscellaneous deductions	NONE	NONE	NONE
Less: Itemized deduction phaseout	6,509.	23,810.	-17,301.
Total itemized deductions	23,823.	34,241.	-10,418.
Standard deduction			
Total exemptions	13,200.	12,800.	400.
Plus: Phase-out	8,800.	12,800.	-4,000.
Taxable income	447,710.	905,363.	-457,653.
Tax Liability			
Gross income tax	125,084.	289,922.	-164,838.
Alternative Minimum Tax	NONE	NONE	NONE
Additional taxes			
Less: Tax credits	6.	NONE	6.
Balance	125,078.	289,922.	-164,844.
Plus: Other taxes		29,987.	-29,987.
Total tax liability	125,078.	319,909.	-194,831.
Less: Withholding	77.		77.
Estimated tax and other payments	93,060.	73,800.	19,260.
Plus: Penalties and interest	1,297.	404.	893.
Balance due (overpayment)	33,238.	246,513.	-213,275.
Effective tax rate	26.3%	34.0%	

Marginal Tax Planning Calculation

Filing status	MFJ
Current tax rate	35.00%
Marginal rate (next highest bracket)	%
Upper income limit of current tax rate	336,550.
Taxable income	447,710.
Unused amount (upper limit-taxable income)	

Note: This can be used to determine how much income is available until the next higher tax rate. It is based upon the 1040 tax tables without regard to phaseouts, the AMT tax rate or capital gains tax rate.

Form **1040**

Department of the Treasury - Internal Revenue Service

U.S. Individual Income Tax Return **2006**

(99)

IRS Use Only - Do not write or staple in this space.

OMB No. 1545-0074

Label

(See instructions on page 16.)

Use the IRS label.

Otherwise, please print or type.

L
A
B
E
L

H
E
R
E

For the year Jan. 1-Dec. 31, 2006, or other tax year beginning

, 2006, ending

Your first name and initial

ANDREW

Last name

COHEN

If a joint return, spouse's first name and initial

RITA

Last name

COHEN

Home address (number and street). If you have a P.O. box, see page 16.

3750 JEFFERSON BOULEVARD

Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, see page 16.

VIRGINIA BEACH

VA

23455

Your social security number

Spouse's social security number

You must enter your SSN(s) above. ▲

Checking a box below will not change your tax or refund.

Presidential Election Campaign

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 16)

☐ You ☐ Spouse**Filing Status**

- 1 ☐ Single
- 2 ☒ Married filing jointly (even if only one had income)
- 3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
- 4 ☐ Head of household (with qualifying person). (See page 17.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
- 5 ☐ Qualifying widow(er) with dependent child (see page 17)

Check only one box.

Exemptions

- 6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a
- b ☒ Spouse

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see page 19)
CHLOE J.	COHEN		CHILD	X
ORION K.	COHEN		CHILD	X

If more than four dependents, see page 19.

Boxes checked on 6a and 6b

No. of children on 6c who:

- lived with you 2
- did not live with you due to divorce or separation (see page 20)

Dependents on 6c not entered above

d Total number of exemptions claimed

Add numbers on lines above ▶ **4****Income**

7	Wages, salaries, tips, etc. Attach Form(s) W-2	STMT 1	7	4,624.
8a	Taxable interest. Attach Schedule B if required		8a	2,816.
b	Tax-exempt interest. Do not include on line 8a	8b		
9a	Ordinary dividends. Attach Schedule B if required		9a	67,639.
b	Qualified dividends (see page 23)	STMT 1 9b 8,171.		
10	Taxable refunds, credits, or offsets of state and local income taxes (see page 24)	STMT 3	10	5,633.
11	Alimony received		11	
12	Business income or (loss). Attach Schedule C or C-EZ		12	-18,544.
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>		13	407,589.
14	Other gains or (losses). Attach Form 4797		14	
15a	IRA distributions	15a	b Taxable amount (see page 25)	15b
16a	Pensions and annuities	16a	b Taxable amount (see page 26)	16b 10,176.
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	NONE
18	Farm income or (loss). Attach Schedule F		18	
19	Unemployment compensation		19	
20a	Social security benefits	20a	b Taxable amount (see page 27)	20b
21	Other income. List type and amount (see page 29)		21	
22	Add the amounts in the far right column for lines 7 through 21. This is your total income . . ▶		22	479,933.

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see page 23.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

Adjusted Gross Income

23	Archer MSA deduction. Attach Form 8853	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	One-half of self-employment tax. Attach Schedule SE	27	
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction (see page 29)	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN ▶	31a	
32	IRA deduction (see page 31)	32	4,000.
33	Student loan interest deduction (see page 33)	33	
34	Jury duty pay you gave to your employer	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 31a and 32 through 35	36	4,000.
37	Subtract line 36 from line 22. This is your adjusted gross income ▶	37	475,933.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 80.

JSA
RS

6A1210 5.000

Form **1040** (2006)

TD5204 2YVG 04/09/2007 17:33:00 V06-5.4 7444

Form 1040 (2006) **ANDREW COHEN & RITA COHEN****2****Tax and Credits**

38	Amount from line 37 (adjusted gross income)	38	475,933.
39a	Check <input type="checkbox"/> You were born before January 2, 1942, <input type="checkbox"/> Blind. <input type="checkbox"/> Total boxes checked 39a		
	if: <input type="checkbox"/> Spouse was born before January 2, 1942, <input type="checkbox"/> Blind. <input type="checkbox"/> 39b		
b If your spouse itemizes on a separate return or you were a dual-status alien, see page 34 and check here			
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	23,823.
41	Subtract line 40 from line 38	41	452,110.
42	If line 38 is over \$112,875, or you provided housing to a person displaced by Hurricane Katrina, see page 36. Otherwise, multiply \$3,300 by the total number of exemptions claimed on line 6d	42	SEE STMT 4 4,400.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	447,710.
44	Tax (see page 36). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	125,084.
45	Alternative minimum tax (see page 39). Attach Form 6251	45	NONE
46	Add lines 44 and 45	46	125,084.
47	Foreign tax credit. Attach Form 1116 if required	47	6.
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Credit for the elderly or the disabled. Attach Schedule R	49	
50	Education credits. Attach Form 8863	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Residential energy credits. Attach Form 5695	52	
53	Child tax credit (see page 42). Attach Form 8901 if required	53	
54	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8839 c <input type="checkbox"/> Form 8859	54	
55	Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	55	NONE
56	Add lines 47 through 55. These are your total credits	56	6.
57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	125,078.

Other Taxes

58	Self-employment tax. Attach Schedule SE	58	
59	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	59	
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	
61	Advance earned income credit payments from Form(s) W-2, box 9	61	
62	Household employment taxes. Attach Schedule H	62	
63	Add lines 57 through 62. This is your total tax	63	125,078.

Payments

64	Federal income tax withheld from Forms W-2 and 1099	64	77.
65	2006 estimated tax payments and amount applied from 2005 return	65	93,000.
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election 66b		
67	Excess social security and tier 1 RRTA tax withheld (see page 60)	67	
68	Additional child tax credit. Attach Form 8812	68	
69	Amount paid with request for extension to file (see page 60)	69	
70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	70	
71	Credit for federal telephone excise tax paid. Attach Form 8913 if required	71	60.
72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	93,137.

Refund

Direct deposit? See page 61 and fill in 74b, 74c, and 74d, or Form 8888.

73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid	73	
74a	Amount of line 73 you want refunded to you . If Form 8888 is attached, check here	74a	
b	Routing number <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number <input type="text"/>		
75	Amount of line 73 you want applied to your 2007 estimated tax	75	

Amount You Owe

76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62	76	33,238.
77	Estimated tax penalty (see page 62)	77	1,297.

Third Party DesigneeDo you want to allow another person to discuss this return with the IRS (see page 63)? ☒ **Yes.** Complete the following. ☐ **No**

Designee's name PREPARER	Phone no.	Personal identification number (PIN)
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	Your occupation	Daytime phone number
Your signature	INVESTOR	
Spouse's signature. If a joint return, both must sign.	SINGER	

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code	MCPHILLIPS, ROBERTS & DEANS, PLC 150 BOUSH STREET, SUITE 1100 NORFOLK VA 23510		EIN <input type="text"/> Phone no. 757-640-7190

SCHEDULES A&B
(Form 1040)Department of the Treasury
Internal Revenue Service (99)**Schedule A - Itemized Deductions**

(Schedule B is on back)

OMB No. 1545-0074

2006Attachment
Sequence No. **07**▶ **Attach to Form 1040.** ▶ **See Instructions for Schedules A&B (Form 1040).**

Name(s) shown on Form 1040

ANDREW COHEN & RITA COHEN

Your social security number

Medical and Dental Expenses**Caution.** Do not include expenses reimbursed or paid by others.

1	Medical and dental expenses (see page A-1) STMT 6	1	15,814.
2	Enter amount from Form 1040, line 38 2 475,933.		
3	Multiply line 2 by 7.5% (.075)	3	35,695.
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	

NONE

Taxes You Paid

(See page A-3.)

5	State and local income taxes	5	13,430.
6	Real estate taxes (see page A-3)	6	8,311.
7	Personal property taxes	7	280.
8	Other taxes. List type and amount	8	
9	Add lines 5 through 8	9	22,021.

Interest You Paid

(See page A-3.)

10	Home mortgage interest and points reported to you on Form 1098	10	
11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-3 and show that person's name, identifying no., and address	11	3,143.
12	Points not reported to you on Form 1098. See page A-4 for special rules	12	
13	Investment interest. Attach Form 4952 if required. (See page A-4.) SEE STATEMENT 6	13	78.
14	Add lines 10 through 13	14	3,221.

Gifts to Charity

If you made a gift and got a benefit for it, see page A-4.

15	Gifts by cash or check. If you made any gift of \$250 or more, see page A-5. SEE STATEMENT 6	15	3,330.
16	Other than by cash or check. If any gift of \$250 or more, see page A-5. You must attach Form 8283 if over \$500	16	1,760.
17	Carryover from prior year	17	
18	Add lines 15 through 17	18	5,090.

STMT 7

Casualty and Theft Losses

19	Casualty or theft loss(es). Attach Form 4684. (See page A-6.)	19	
-----------	---	-----------	--

Job Expenses and Certain Miscellaneous Deductions

(See page A-6.)

20	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-6.)	20	
21	Tax preparation fees	21	300.
22	Other expenses - investment, safe deposit box, etc. List type and amount	22	7,645.
23	Add lines 20 through 22	23	7,945.
24	Enter amount from Form 1040, line 38 24 475,933.	24	
25	Multiply line 24 by 2% (.02)	25	9,519.
26	Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-	26	

NONE

Other Miscellaneous Deductions

27	Other- from list on page A-7. List type and amount	27	
-----------	--	-----------	--

Total Itemized Deductions

28	Is Form 1040, line 38, over \$150,500 (over \$75,250 if married filing separately)? <input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter this amount on Form 1040, line 40. <input checked="" type="checkbox"/> Yes. Your deduction may be limited. See page A-7 for the amount to enter.	28	23,823.
29	If you elect to itemize deductions even though they are less than your standard deduction, check here		SEE STMT 8

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2006

Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side.

Your social security number

ANDREW COHEN & RITA COHEN

Schedule B - Interest and Ordinary Dividends

Attachment
Sequence No. 08Part I
Interest(See page B-1
and the
instructions for
Form 1040,
line 8a.)**Note.** If you
received a Form
1099-INT, Form
1099-OID, or
substitute
statement from
a brokerage firm,
list the firm's
name as the
payer and enter
the total interest
shown on that
form.

	Amount
1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ▶	
J BANK OF AMERICA	926.
T ADD,L INT 05 ENVEST II	225.
T AMERITRADE	83.
T VIANIX LC	969.
T ENVEST II LLC	438.
INTEREST INCOME ON FEDERAL TAX REFUND(S)	175.
2 Add the amounts on line 1	2,816.
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	
4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a	2,816.
Note. If line 4 is over \$1,500, you must complete Part III.	

Part II
Ordinary
Dividends(See page B-1
and the
instructions for
Form 1040,
line 9a.)**Note.** If you
received a Form
1099-DIV or
substitute
statement from
a brokerage firm,
list the firm's
name as the
payer and enter
the ordinary
dividends shown
on that form.

	Amount
5 List name of payer ▶	
T BERNARD L. MADOFF	58,418.
T VANGUARD - INTL STOCK INDEX	1,505.
T VANGUARD - STOCK MKT IDX ADM	3,213.
T AMERITRADE	4,503.
6 Add the amounts on line 5. Enter the total here and on Form 1040, line 9a	67,639.
Note. If line 6 is over \$1,500, you must complete Part III.	

Part III
Foreign
Accounts
and Trusts(See
page B-2.)

	Yes	No
You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; or (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.		
7a At any time during 2006, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22.1		X
b If "Yes," enter the name of the foreign country ▶		
8 During 2006, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See page B-2		X

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule B (Form 1040) 2006

JSA
6A1600 4.000

**SCHEDULE C
(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

OMB No. 1545-0074

2006Attachment
Sequence No. **09**Department of the Treasury
Internal Revenue Service (99)

► Attach to Form 1040, 1040NR, or 1041.

► See Instructions for Schedule C (Form 1040).

Name of proprietor

RITA COHEN

Social security number (SSN)

A Principal business or profession, including product or service (see page C-2 of the instructions)**B** Enter code from pages C-8, 9, & 10

INDEPENDENT ARTISTS, WRITERS, PERFORMERS

711510

C Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), if any

RITA A. COHEN

E Business address (including suite or room no.) ► 3940 MEETING HOUSE ROAD

City, town or post office, state, and ZIP code VIRGINIA BEACH, VA. 23455

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2006? If "No," see page C-2 for limit on losses ☒ Yes ☐ No**H** If you started or acquired this business during 2006, check here ☐ ☐**Part I Income**

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here STMT. 9. <input type="checkbox"/>	1	3,500.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	3,500.
4 Cost of goods sold (from line 42 on page 2)	4	
5 Gross profit. Subtract line 4 from line 3	5	3,500.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)	6	
7 Gross income. Add lines 5 and 6	7	3,500.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8	360.	18 Office expense	18	
9 Car and truck expenses (see page C-4) . . . STMT. 9.	9	1,982.	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):		
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	550.
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	1,208.
b Other	16b		b Deductible meals and entertainment (see page C-6)	24b	344.
17 Legal and professional services	17		25 Utilities	25	
			26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	3,855.
28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	28	8,299.			
29 Tentative profit (loss). Subtract line 28 from line 7	29	-4,799.			
30 Expenses for business use of your home. Attach Form 8829	30				

31 **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040, line 12,** and **Schedule SE, line 2,** or on **Form 1040 NR, line 13** (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If a loss, you **must** go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see page C-6).

- If you checked 32a, enter the loss on both **Form 1040, line 12,** and **Schedule SE, line 2,** or on **Form 1040NR, line 13** (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

31 -4,799.

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see page C-7 of the instructions.

Schedule C (Form 1040) 2006

Part III Cost of Goods Sold (see page C-7)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation			
			<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation		35	
36	Purchases less cost of items withdrawn for personal use		36	
37	Cost of labor. Do not include any amounts paid to yourself		37	
38	Materials and supplies		38	
39	Other costs		39	
40	Add lines 35 through 39		40	
41	Inventory at end of year		41	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4			42

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ▶	
44	Of the total number of miles you drove your vehicle during 2006, enter the number of miles you used your vehicle for:	
	a Business	b Commuting (see instructions)
	c Other	
45	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

AUDITION EXPENSES	230.
VOICE TRAINING	1,175.
SHEET MUSIC	100.
COSTUMES	632.
MAKE UP AND HAIR	933.
PICTURES	150.
PIANO ACCOMPANIEST	480.
PIANO TUNING	85.
PROFESSIONAL MAGAZINES, JOURNALS	70.
48 Total other expenses. Enter here and on page 1, line 27	48 3,855.

**SCHEDULE C
(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

OMB No. 1545-0074

2006Attachment
Sequence No. **09**Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or 1041.

▶ See Instructions for Schedule C (Form 1040).

Name of proprietor

ANDREW COHEN

Social security number (SSN)

A Principal business or profession, including product or service (see page C-2 of the instructions)

RESIDENTIAL BUILDING CONSTRUCTION

B Enter code from pages C-8, 9, & 10

236100

C Business name. If no separate business name, leave blank.

ANDREW 'S DREAMLAND, LLC

D Employer ID number (EIN), if any**E** Business address (including suite or room no.) ▶ 3940 MEETING HOUSE DRIVE

City, town or post office, state, and ZIP code VIRGINIA BEACH, VA. 23455

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2006? If "No," see page C-2 for limit on losses☒ Yes☐ No**H** If you started or acquired this business during 2006, check here**Part I Income**

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here	<input type="checkbox"/>	1	
2 Returns and allowances		2	
3 Subtract line 2 from line 1		3	
4 Cost of goods sold (from line 42 on page 2)		4	10,730.
5 Gross profit. Subtract line 4 from line 3		5	-10,730.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)		6	
7 Gross income. Add lines 5 and 6		7	-10,730.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8		18 Office expense	18	
9 Car and truck expenses (see page C-4)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):		
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	25.
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see page C-6)	24b	
17 Legal and professional services	17	2,810.	25 Utilities	25	
			26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	180.

28 **Total expenses** before expenses for business use of home. Add lines 8 through 27 in columns

3,015.

29 Tentative profit (loss). Subtract line 28 from line 7

-13,745.

30 Expenses for business use of your home. Attach **Form 8829****31** **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040, line 12**, and **Schedule SE, line 2**, or on **Form 1040 NR, line 13** (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If a loss, you **must** go to line 32.

-13,745.

32 If you have a loss, check the box that describes your investment in this activity (see page C-6).

- If you checked 32a, enter the loss on both **Form 1040, line 12**, and **Schedule SE, line 2**, or on **Form 1040NR, line 13** (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see page C-7 of the instructions.

Schedule C (Form 1040) 2006

Part III Cost of Goods Sold (see page C-7)

33 Method(s) used to value closing inventory: a ☒ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☒ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	NONE
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs SEE STATEMENT 10	39	10,730.
40 Add lines 35 through 39	40	10,730.
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42	10,730.

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ►

44 Of the total number of miles you drove your vehicle during 2006, enter the number of miles you used your vehicle for:

a Business b Commuting (see instructions) c Other

45 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

46 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

47 a Do you have evidence to support your deduction? ☐ Yes ☐ No
b If "Yes," is the evidence written? ☐ Yes ☐ No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

AMORTIZATION	180.
48 Total other expenses. Enter here and on page 1, line 27	48 180.

**SCHEDULE D
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Capital Gains and Losses**

▶ Attach to Form 1040 or Form 1040NR.

▶ See Instructions for Schedule D (Form 1040).

▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

2006
Attachment
Sequence No. **12**

Name(s) shown on return

Your so

ANDREW COHEN & RITA COHEN

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see page D-6 of the instructions)	(e) Cost or other basis (see page D-7 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
1 BERNARD L. MADOFF			28,220,566.	27,882,480.	338,086.
VANGUARD TOTAL STK MKT IDX	VARIOUS	04/06/2006	46,000.	42,462.	3,538.
VARIOUS AMERITRADE SHORT TERM	VAR	VAR	340,706.	290,936.	49,770.
2 Enter your short-term totals, if any, from Schedule D-1, line 2		2			
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)		3	28,607,272.		
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss Carryover Worksheet on page D-7 of the instructions				6	()
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)				7	391,394.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see page D-6 of the instructions)	(e) Cost or other basis (see page D-7 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
8 VARIOUS AMERITRADE LONG TERM	VAR	VAR	71,718.	84,816.	-13,098.
9 Enter your long-term totals, if any, from Schedule D-1, line 9		9			
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)		10	71,718.		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12	28,966.
13 Capital gain distributions. See page D-2 of the instructions				13	327.
14 Long-term capital loss carryover. Enter the amount, if any, from line 15 of your Capital Loss Carryover Worksheet on page D-7 of the instructions				14	()
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to Part III on the back				15	16,195.

For Paperwork Reduction Act Notice, see Form 1040 or Form 1040NR instructions.

Schedule D (Form 1040) 2006

Part III Summary

16	Combine lines 7 and 15 and enter the result. If line 16 is a loss, skip lines 17 through 20, and go to line 21. If a gain, enter the gain on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below	16	407,589.
17	Are lines 15 and 16 both gains? <input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions ▶	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions ▶	19	81.
20	Are lines 18 and 19 both zero or blank? <input type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 38 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below. <input checked="" type="checkbox"/> No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) }	21	()
Note. When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 38 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2006

**SCHEDULE E
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Supplemental Income and Loss**
(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

2006Attachment
Sequence No. **13**

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ See Instructions for Schedule E (Form 1040).

Name(s) shown on return

Your social security number

ANDREW COHEN & RITA COHEN

Part I Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see page E-3). Report farm rental income or loss from Form 4835 on page 2, line 40.

1	List the type and location of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:	Yes	No
A	-----	<ul style="list-style-type: none"> • 14 days or • 10% of the total days rented at fair rental value? (See page E-3.)	A		
B	-----		B		
C	-----		C		

Income:

		Properties			Totals
		A	B	C	(Add columns A, B, and C.)
3	Rents received	3			3
4	Royalties received	4			4
Expenses:					
5	Advertising	5			
6	Auto and travel (see page E-4)	6			
7	Cleaning and maintenance	7			
8	Commissions	8			
9	Insurance	9			
10	Legal and other professional fees	10			
11	Management fees	11			
12	Mortgage interest paid to banks, etc. (see page E-4)	12			12
13	Other interest	13			
14	Repairs	14			
15	Supplies	15			
16	Taxes	16			
17	Utilities	17			
18	Other (list) ▶ ----- ----- -----	18			
19	Add lines 5 through 18	19			19
20	Depreciation expense or depletion (see page E-4)	20			20
21	Total expenses. Add lines 19 and 20	21			
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file Form 6198	22			
23	Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23	()	()	()
24	Income. Add positive amounts shown on line 22. Do not include any losses	24			
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25			()
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26			

For Paperwork Reduction Act Notice, see page E-7 of the instructions.

Schedule E (Form 1040) 2006

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

ANDREW COHEN & RITA COHEN

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations** **Note.** If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See page E-1.

- 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☐ Yes ☒ No
If you answered "Yes," see page E-6 before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	VIANIX LC	P		2	
B	ENVEST II LLC	P		0	
C					
D					

STMT 13 Passive Income and Loss**Nonpassive Income and Loss**

(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A	NONE			
B	NONE			
C				
D				
29a Totals	NONE			
b Totals				
30 Add columns (g) and (j) of line 29a			30	NONE
31 Add columns (f), (h), and (i) of line 29b			31	()
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below			32	NONE

Part III Income or Loss From Estates and Trusts

33		(a) Name	(b) Employer identification number	
A				
B				
Passive Income and Loss			Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)		(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A				
B				
34a	Totals			
b	Totals			
35 Add columns (d) and (f) of line 34a			35	
36 Add columns (c) and (e) of line 34b			36	()
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below			37	

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see page E-7)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39	

Part V Summary

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	NONE
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and Schedule K-1 (Form 1041), line 14, code F (see page E-7)	42	
43 Reconciliation for real estate professionals. If you were a real estate professional (see page E-1), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Form **3800**
Department of the Treasury
Internal Revenue Service (99)**General Business Credit**▶ See separate instructions.
▶ Attach to your tax return.

OMB No. 1545-0895

2006
Attachment
Sequence No. **22**

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Identifying number

Part I Current Year Credit**Important:** You may not be required to complete and file a separate credit form (shown in parentheses below) to claim the credit. For details, see **What's New** in the instructions.

1 a Investment credit (attach Form 3468)	1a	
b Work opportunity credit (Form 5884)	1b	
c Welfare-to-work credit (Form 8861)	1c	
d Credit for increasing research activities (Form 6765)	1d	42 .
e Low-income housing credit (Form 8586) (enter EIN if claiming this credit from a pass-through entity: _____)	1e	
f Enhanced oil recovery credit only from partnerships and S corporations (see instructions)	1f	
g Disabled access credit (Form 8826) (do not enter more than \$5,000)	1g	
h Renewable electricity production credit (Form 8835, Section A only)	1h	
i Indian employment credit (Form 8845)	1i	
j Credit for employer social security and Medicare taxes paid on certain employee tips (Form 8846)	1j	
k Orphan drug credit (Form 8820)	1k	
l New markets credit (Form 8874) (enter EIN if claiming this credit from a pass-through entity: _____)	1l	
m Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	1m	
n Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming this credit from a pass-through entity: _____)	1n	
o Qualified railroad track maintenance credit (Form 8900)	1o	
p Biodiesel and renewable diesel fuels credit (attach Form 8864)	1p	
q Low sulfur diesel fuel production credit (Form 8896)	1q	
r Distilled spirits credit (Form 8906)	1r	
s Nonconventional source fuel credit (Form 8907)	1s	
t Energy efficient home credit (Form 8908)	1t	
u Energy efficient appliance credit (Form 8909)	1u	
v Alternative motor vehicle credit (Form 8910)	1v	
w Alternative fuel vehicle refueling property credit (Form 8911)	1w	
x Credit for contributions to selected community development corporations (Form 8847)	1x	
y Mine rescue team training credit (Form 8923)	1y	
z General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1z	
aa Credits for employers affected by Hurricane Katrina, Rita, or Wilma (Form 5884-A)	1aa	
2 Add lines 1a through 1aa	2	42 .
3 Passive activity credits included on line 2 (see instructions)	3	42 .
4 Subtract line 3 from line 2	4	
5 Passive activity credits allowed for 2006 (see instructions)	5	
6 Carryforward of general business credit to 2006. See instructions for the schedule to attach	6	
7 Carryback of general business credit from 2007 (see instructions)	7	
8 Current year credit. Add lines 4 through 7	8	NONE

For Paperwork Reduction Act Notice, see separate instructions.

Form **3800** (2006)

Part II Allowable Credit

9	Regular tax before credits: <ul style="list-style-type: none">● Individuals. Enter the amount from Form 1040, line 44 or Form 1040NR, line 41● Corporations. Enter the amount from Form 1120, Schedule J, line 2; Form 1120-A, Part I, line 1; or the applicable line of your return● Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return		9	125,084.
10	Alternative minimum tax: <ul style="list-style-type: none">● Individuals. Enter the amount from Form 6251, line 35● Corporations. Enter the amount from Form 4626, line 14● Estates and trusts. Enter the amount from Form 1041, Schedule I, line 56		10	NONE
11	Add lines 9 and 10		11	125,084.
12 a	Foreign tax credit	12a	6.	
b	Credits from Form 1040, lines 48 through 54 (or Form 1040NR, lines 45 through 49)	12b		
c	Qualified electric vehicle credit (Form 8834, line 20)	12c		
d	Non-business alternative motor vehicle credit (Form 8910, line 18)	12d		
e	Non-business alternative fuel vehicle refueling property credit (Form 8911, line 19)	12e		
f	Add lines 12a through 12e	12f	6.	
13	Net income tax. Subtract line 12f from line 11. If zero, skip lines 14 through 17 and enter -0- on line 18		13	125,078.
14	Net regular tax. Subtract line 12f from line 9. If zero or less, enter -0-	14	125,078.	
15	Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see instructions)	15	25,020.	
16	Tentative minimum tax: <ul style="list-style-type: none">● Individuals. Enter the amount from Form 6251, line 33● Corporations. Enter the amount from Form 4626, line 12● Estates and trusts. Enter the amount from Form 1041, Schedule I, line 54	16	122,691.	
17	Enter the greater of line 15 or line 16		17	122,691.
18	Subtract line 17 from line 13. If zero or less, enter -0-		18	2,387.
19	Credit allowed for the current year. Enter the smaller of line 8 or line 18. Individuals, estates, and trusts: See the instructions for line 19 if claiming the research credit. C corporations: See the line 19 instructions if there has been an ownership change, acquisition, or reorganization. Report the amount from line 19 (if smaller than line 8, see instructions) as indicated below or on the applicable line of your return: <ul style="list-style-type: none">● Individuals. Form 1040, line 55 or Form 1040NR, line 50● Corporations. Form 1120, Schedule J, line 5c; or Form 1120-A, Part I, line 2● Estates and trusts. Form 1041, Schedule G, line 2c		19	NONE

Form 3800 (2006)

Form **6198**
Department of the Treasury
Internal Revenue ServicePg 20 of 94
At-Risk Limitations▶ Attach to your tax return.
▶ See separate instructions.

OMB No. 1545-0712

2006
Attachment
Sequence No. 31

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Identifying number

Description of activity (see page 2 of the instructions)

VIANIX LC

Part I Current Year Profit (Loss) From the Activity, Including Prior Year Nondeductible Amounts
(see page 2 of the instructions).

1	Ordinary income (loss) from the activity (see page 2 of the instructions)	1	-10,233.
2	Gain (loss) from the sale or other disposition of assets used in the activity (or of your interest in the activity) that you are reporting on:		
a	Schedule D	2a	
b	Form 4797	2b	
c	Other form or schedule	2c	
3	Other income and gains from the activity, from Schedule K-1 of Form 1065, Form 1065-B, or Form 1120S, that were not included on lines 1 through 2c	3	969.
4	Other deductions and losses from the activity, including investment interest expense allowed from Form 4952, that were not included on lines 1 through 2c	4	(57)
5	Current year profit (loss) from the activity. Combine lines 1 through 4. See page 3 of the instructions before completing the rest of this form	5	-9,321.

Part II Simplified Computation of Amount At Risk. See page 3 of the instructions before completing this part.

6	Adjusted basis (as defined in section 1011) in the activity (or in your interest in the activity) on the first day of the tax year. Do not enter less than zero	6	28,846.
7	Increases for the tax year (see page 3 of the instructions)	7	
8	Add lines 6 and 7	8	28,846.
9	Decreases for the tax year (see page 4 of the instructions)	9	
10a	Subtract line 9 from line 8	10a	28,846.
b	If line 10a is more than zero, enter that amount here and go to line 20 (or complete Part III). Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	10b	28,846.

Part III Detailed Computation of Amount At Risk. If you completed Part III of Form 6198 for 2005, see page 4 of the instructions.

11	Investment in the activity (or in your interest in the activity) at the effective date. Do not enter less than zero	11	
12	Increases at effective date	12	
13	Add lines 11 and 12	13	
14	Decreases at effective date	14	
15	Amount at risk (check box that applies):		
a	<input type="checkbox"/> At effective date. Subtract line 14 from line 13. Do not enter less than zero.	15	
b	<input type="checkbox"/> From 2005 Form 6198, line 19b. Do not enter the amount from line 10b of the 2005 form.		
16	Increases since (check box that applies):		
a	<input type="checkbox"/> Effective date	b	<input type="checkbox"/> The end of your 2005 tax year
17	Add lines 15 and 16	17	
18	Decreases since (check box that applies):		
a	<input type="checkbox"/> Effective date	b	<input type="checkbox"/> The end of your 2005 tax year
19a	Subtract line 18 from line 17	19a	
b	If line 19a is more than zero, enter that amount here and go to line 20. Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	19b	

Part IV Deductible Loss

20	Amount at risk. Enter the larger of line 10b or line 19b	20	28,846.
21	Deductible loss. Enter the smaller of the line 5 loss (treated as a positive number) or line 20. See page 7 of the instructions to find out how to report any deductible loss and any carryover.	21	STMT 14 (9,321)

Note: If the loss is from a passive activity, see the Instructions for **Form 8582**, *Passive Activity Loss Limitations*, or the Instructions for **Form 8810**, *Corporate Passive Activity Loss and Credit Limitations*, to find out if the loss is allowed under the passive activity rules. If only part of the loss is subject to the passive activity loss rules, report only that part on Form 8582 or Form 8810, whichever applies.

For Paperwork Reduction Act Notice, see page 8 of the instructions.

Form **6198** (2006)

Form **6198**Department of the Treasury
Internal Revenue ServicePg 21 of 94
At-Risk Limitations

- ▶ Attach to your tax return.
▶ See separate instructions.

OMB No. 1545-0712

2006
Attachment
Sequence No. 31

Name(s) shown on return

ALTERNATIVE MINIMUM TAX

Identifying number

ANDREW COHEN & RITA COHEN

Description of activity (see page 2 of the instructions)

VIANIX LC

Part I Current Year Profit (Loss) From the Activity, Including Prior Year Nondeductible Amounts
(see page 2 of the instructions).

1	Ordinary income (loss) from the activity (see page 2 of the instructions)	1	-10,214.
2	Gain (loss) from the sale or other disposition of assets used in the activity (or of your interest in the activity) that you are reporting on:		
a	Schedule D	2a	
b	Form 4797	2b	
c	Other form or schedule	2c	
3	Other income and gains from the activity, from Schedule K-1 of Form 1065, Form 1065-B, or Form 1120S, that were not included on lines 1 through 2c	3	969.
4	Other deductions and losses from the activity, including investment interest expense allowed from Form 4952, that were not included on lines 1 through 2c	4	(57)
5	Current year profit (loss) from the activity. Combine lines 1 through 4. See page 3 of the instructions before completing the rest of this form	5	-9,302.

Part II Simplified Computation of Amount At Risk. See page 3 of the instructions before completing this part.

6	Adjusted basis (as defined in section 1011) in the activity (or in your interest in the activity) on the first day of the tax year. Do not enter less than zero	6	28,809.
7	Increases for the tax year (see page 3 of the instructions)	7	
8	Add lines 6 and 7	8	28,809.
9	Decreases for the tax year (see page 4 of the instructions)	9	
10a	Subtract line 9 from line 8	10a	28,809.
b	If line 10a is more than zero, enter that amount here and go to line 20 (or complete Part III). Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	10b	28,809.

Part III Detailed Computation of Amount At Risk. If you completed Part III of Form 6198 for 2005, see page 4 of the instructions.

11	Investment in the activity (or in your interest in the activity) at the effective date. Do not enter less than zero	11	
12	Increases at effective date	12	
13	Add lines 11 and 12	13	
14	Decreases at effective date	14	
15	Amount at risk (check box that applies):		
a	<input type="checkbox"/> At effective date. Subtract line 14 from line 13. Do not enter less than zero.	15	
b	<input type="checkbox"/> From 2005 Form 6198, line 19b. Do not enter the amount from line 10b of the 2005 form.		
16	Increases since (check box that applies):		
a	<input type="checkbox"/> Effective date	b	<input type="checkbox"/> The end of your 2005 tax year
17	Add lines 15 and 16	17	
18	Decreases since (check box that applies):		
a	<input type="checkbox"/> Effective date	b	<input type="checkbox"/> The end of your 2005 tax year
19a	Subtract line 18 from line 17	19a	
b	If line 19a is more than zero, enter that amount here and go to line 20. Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	19b	

Part IV Deductible Loss

20	Amount at risk. Enter the larger of line 10b or line 19b	20	28,809.
21	Deductible loss. Enter the smaller of the line 5 loss (treated as a positive number) or line 20. See page 7 of the instructions to find out how to report any deductible loss and any carryover.	21	STMT 15 (9,302)

Note: If the loss is from a passive activity, see the Instructions for **Form 8582**, *Passive Activity Loss Limitations*, or the Instructions for **Form 8810**, *Corporate Passive Activity Loss and Credit Limitations*, to find out if the loss is allowed under the passive activity rules. If only part of the loss is subject to the passive activity loss rules, report only that part on Form 8582 or Form 8810, whichever applies.

For Paperwork Reduction Act Notice, see page 8 of the instructions.

Form **6198** (2006)

Form

6251**Alternative Minimum Tax - Individuals**Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2006Attachment
Sequence No. **32**

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

ANDREW COHEN & RITA COHEN

Part I Alternative Minimum Taxable Income (See instructions for how to complete each line)

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 6), and go to line 2. Otherwise, enter the amount from Form 1040, line 38 (minus any amount on Form 8914, line 6), and go to line 7. (If less than zero, enter as a negative amount.)	1	452,110.
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2 1/2% of Form 1040, line 38	2	NONE
3	Taxes from Schedule A (Form 1040), line 9	3	22,021.
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 26	5	NONE
6	If Form 1040, line 38, is over \$150,500 (over \$75,250 if married filing separately), enter the amount from line 11 of the Itemized Deductions Worksheet on page A-7 of the instructions for Schedule A (Form 1040)	6	(6,509.)
7	Tax refund from Form 1040, line 10 or line 21	7	(5,633.)
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Interest from specified private activity bonds exempt from the regular tax	11	
12	Qualified small business stock (7% of gain excluded under section 1202)	12	
13	Exercise of incentive stock options (excess of AMT income over regular tax income)	13	
14	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	14	
15	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	15	
16	Disposition of property (difference between AMT and regular tax gain or loss)	16	
17	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	17	NONE
18	Passive activities (difference between AMT and regular tax income or loss)	18	NONE
19	Loss limitations (difference between AMT and regular tax income or loss)	19	
20	Circulation costs (difference between regular tax and AMT)	20	
21	Long-term contracts (difference between AMT and regular tax income)	21	
22	Mining costs (difference between regular tax and AMT)	22	
23	Research and experimental costs (difference between regular tax and AMT)	23	
24	Income from certain installment sales before January 1, 1987	24	()
25	Intangible drilling costs preference	25	
26	Other adjustments, including income-based related adjustments	26	NONE
27	Alternative tax net operating loss deduction	27	()
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$200,100, see page 7 of the instructions.)	28	461,989.

Part II Alternative Minimum Tax

29	Exemption. (If this form is for a child under age 18, see page 7 of the instructions.)		
	IF your filing status is . . . AND line 28 is not over . . . THEN enter on line 29 . . . Single or head of household . . . \$112,500 . . . \$42,500 Married filing jointly or qualifying widow(er) . . . 150,000 . . . 62,550 Married filing separately . . . 75,000 . . . 31,275	29	STMT 16 NONE
	If line 28 is over the amount shown above for your filing status, see page 7 of the instructions.		
30	Subtract line 29 from line 28. If more than zero or you are filing Form 2555 or 2555-EZ, go to line 31. If zero or less and you are not filing Form 2555 or 2555-EZ, enter -0- on lines 33 and 35 and skip the rest of Part II	30	461,989.
31	• If you are filing Form 2555 or 2555-EZ, see page 8 of the instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 55 here. • All others: If line 30 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	31	122,697.
32	Alternative minimum tax foreign tax credit (see page 8 of the instructions)	32	6.
33	Tentative minimum tax. Subtract line 32 from line 31	33	122,691.
34	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Schedule J to figure your tax, the amount for line 44 of Form 1040 must be refigured without using Schedule J (see page 9 of the instructions)	34	125,078.
35	Alternative minimum tax. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	NONE

For Paperwork Reduction Act Notice, see page 10 of the instructions.

Form **6251** (2006)JSA
6X4700 2.000

Part III Tax Computation Using Maximum Capital Gains Rates

36	Enter the amount from Form 6251, line 30	36	461,989.
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see page 10 of the instructions)	37	24,285.
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see page 10 of the instructions)	38	81.
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary)	39	24,366.
40	Enter the smaller of line 36 or line 39	40	24,366.
41	Subtract line 40 from line 36	41	437,623.
42	If line 41 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	42	119,034.
43	Enter: <ul style="list-style-type: none"> • \$61,300 if married filing jointly or qualifying widow(er), • \$30,650 if single or married filing separately, or • \$41,050 if head of household. 	43	61,300.
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	44	423,425.
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	
46	Enter the smaller of line 36 or line 37	46	24,285.
47	Enter the smaller of line 45 or line 46	47	
48	Multiply line 47 by 5% (.05)	48	
49	Subtract line 47 from line 46	49	24,285.
50	Multiply line 49 by 15% (.15)	50	3,643.
	If line 38 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go to line 51.		
51	Subtract line 46 from line 40	51	81.
52	Multiply line 51 by 25% (.25)	52	20.
53	Add lines 42, 48, 50, and 52	53	122,697.
54	If line 36 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	54	125,857.
55	Enter the smaller of line 53 or line 54 here and on line 31	55	122,697.

Form 6251 (2006)

Form **8606****Nondeductible IRAs**

OMB No. 1545-0074

2006Attachment
Sequence No. **48**Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.

Name. If married, file a separate form for each spouse required to file Form 8606. See page 5 of the instructions.

Your social security number

ANDREW COHEN

Home address (number and street, or P.O. box if mail is not delivered to your home)

Apt. no.

**Fill in Your Address Only
If You Are Filing This
Form by Itself and Not
With Your Tax Return**

City, town or post office, state, and ZIP code

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2006.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2006 **and** you made nondeductible contributions to a traditional IRA in 2006 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified hurricane distribution), qualified charitable distribution, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2006 (excluding any portion you recharacterized) **and** you made nondeductible contributions to a traditional IRA in 2006 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2006, including those made for 2006 from January 1, 2007, through April 16, 2007 (see page 5 of the instructions)	1	624.
2	Enter your total basis in traditional IRAs (see page 5 of the instructions)	2	4,000.
3	Add lines 1 and 2	3	4,624.
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> In 2006, did you take a distribution from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion? </div> <div style="display: inline-block; vertical-align: top; margin-left: 10px;"> <p>No → Enter the amount from line 3 on line 14. Do not complete the rest of Part I.</p> <p>Yes → Go to line 4.</p> </div>			
4	Enter those contributions included on line 1 that were made from January 1, 2007, through April 16, 2007	4	
5	Subtract line 4 from line 3	5	
6	Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2006, plus any outstanding rollovers. Subtract any repayments of qualified hurricane distributions. If the result is zero or less, enter -0- (see page 5 of the instructions)	6	
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2006. Do not include rollovers (other than repayments of qualified hurricane distributions), qualified charitable distributions, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions (see page 6 of the instructions)	7	
8	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2006. Do not include amounts converted that you later recharacterized (see page 6 of the instructions). Also enter this amount on line 16	8	
9	Add lines 6, 7, and 8	9	
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"	10	X
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth IRAs. Also enter this amount on line 17	11	
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA	12	
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2006 and earlier years	14	4,624.
15a	Subtract line 12 from line 7	15a	
b	Amount on line 15a attributable to qualified hurricane distributions (see page 6 of the instructions). Also enter this amount on Form 8915, line 22	15b	
c	Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	15c	
Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age 59 1/2 at the time of the distribution (see page 6 of the instructions).			

For Privacy Act and Paperwork Reduction Act Notice, see page 8 of the instructions.

Form **8606** (2006)

Form 8606 (2006)

ANDREW COHEN

Page **2****Part II 2006 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs**

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2006 (excluding any portion you recharacterized).

Caution: If your modified adjusted gross income is over \$100,000 or you are married filing separately and you lived with your spouse at any time in 2006, you **cannot** convert any amount from traditional, SEP, or SIMPLE IRAs to Roth IRAs for 2006. If you erroneously made a conversion, you must recharacterize (correct) it (see page 6 of the instructions).

16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2006. Do not include amounts you later recharacterized back to traditional, SEP, or SIMPLE IRAs in 2006 or 2007 (see page 7 of the instructions)	16	
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see page 7 of the instructions)	17	
18	Taxable amount. Subtract line 17 from line 16. Also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	18	

Part III Distributions From Roth IRAs

Complete this part only if you took a distribution from a Roth IRA in 2006. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified hurricane distribution), qualified charitable distribution, recharacterization, or return of certain contributions (see page 7 of the instructions).

19	Enter your total nonqualified distributions from Roth IRAs in 2006 including any qualified first-time homebuyer distributions (see page 7 of the instructions)	19	
20	Qualified first-time homebuyer expenses (see page 7 of the instructions). Do not enter more than \$10,000	20	
21	Subtract line 20 from line 19. If zero or less, enter -0- and skip lines 22 through 25	21	
22	Enter your basis in Roth IRA contributions (see page 7 of the instructions)	22	
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see page 7 of the instructions)	23	
24	Enter your basis in Roth IRA conversions (see page 7 of the instructions)	24	
25 a	Subtract line 24 from line 23. If zero or less, enter -0- and skip lines 25b and 25c	25a	
b	Amount on line 25a attributable to qualified hurricane distributions (see page 8 of the instructions). Also enter this amount on Form 8915, line 23	25b	
c	Taxable amount. Subtract line 25b from line 25a. If more than zero, also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	25c	

Sign Here Only If You Are Filing This Form by Itself and Not With Your Tax Return

Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete.

▶ Your signature ▶ Date

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code ▶	MCPHILLIPS, ROBERTS & DEANS, PLC 150 BOUSH STREET, SUITE 1100 NORFOLK VA 23510		EIN ▶ 757 640-7190

Form **8606** (2006)

Form **8606**Department of the Treasury
Internal Revenue Service (99)**Nondeductible IRAs**

▶ See separate instructions.

OMB No. 1545-0074

2006Attachment
Sequence No. **48**

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.

Name. If married, file a separate form for each spouse required to file Form 8606. See page 5 of the instructions.

Your social security number

RITA COHEN

Home address (number and street, or P.O. box if mail is not delivered to your home)

Apt. no.

**Fill in Your Address Only
If You Are Filing This
Form by Itself and Not
With Your Tax Return**

City, town or post office, state, and ZIP code

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2006.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2006 **and** you made nondeductible contributions to a traditional IRA in 2006 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified hurricane distribution), qualified charitable distribution, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2006 (excluding any portion you recharacterized) **and** you made nondeductible contributions to a traditional IRA in 2006 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2006, including those made for 2006 from January 1, 2007, through April 16, 2007 (see page 5 of the instructions)	1	
2	Enter your total basis in traditional IRAs (see page 5 of the instructions)	2	4,000.
3	Add lines 1 and 2	3	4,000.
<div>In 2006, did you take a distribution from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion?</div> <div>No → Enter the amount from line 3 on line 14. Do not complete the rest of Part I. Yes → Go to line 4.</div>			
4	Enter those contributions included on line 1 that were made from January 1, 2007, through April 16, 2007	4	
5	Subtract line 4 from line 3	5	
6	Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2006, plus any outstanding rollovers. Subtract any repayments of qualified hurricane distributions. If the result is zero or less, enter -0- (see page 5 of the instructions)	6	
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2006. Do not include rollovers (other than repayments of qualified hurricane distributions), qualified charitable distributions, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions (see page 6 of the instructions)	7	
8	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2006. Do not include amounts converted that you later recharacterized (see page 6 of the instructions). Also enter this amount on line 16	8	
9	Add lines 6, 7, and 8	9	
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"	10	X
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth IRAs. Also enter this amount on line 17	11	
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA	12	
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2006 and earlier years	14	4,000.
15a	Subtract line 12 from line 7	15a	
b	Amount on line 15a attributable to qualified hurricane distributions (see page 6 of the instructions). Also enter this amount on Form 8915, line 22	15b	
c	Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	15c	
Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age 59 1/2 at the time of the distribution (see page 6 of the instructions).			

For Privacy Act and Paperwork Reduction Act Notice, see page 8 of the instructions.

Form **8606** (2006)

Form 8606 (2006)

RITA COHEN

Page **2****Part II 2006 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs**

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2006 (excluding any portion you recharacterized).

Caution: If your modified adjusted gross income is over \$100,000 or you are married filing separately and you lived with your spouse at any time in 2006, you **cannot** convert any amount from traditional, SEP, or SIMPLE IRAs to Roth IRAs for 2006. If you erroneously made a conversion, you must recharacterize (correct) it (see page 6 of the instructions).

16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2006. Do not include amounts you later recharacterized back to traditional, SEP, or SIMPLE IRAs in 2006 or 2007 (see page 7 of the instructions)	16	
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see page 7 of the instructions)	17	
18	Taxable amount. Subtract line 17 from line 16. Also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	18	

Part III Distributions From Roth IRAs

Complete this part only if you took a distribution from a Roth IRA in 2006. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified hurricane distribution), qualified charitable distribution, recharacterization, or return of certain contributions (see page 7 of the instructions).

19	Enter your total nonqualified distributions from Roth IRAs in 2006 including any qualified first-time homebuyer distributions (see page 7 of the instructions)	19	
20	Qualified first-time homebuyer expenses (see page 7 of the instructions). Do not enter more than \$10,000	20	
21	Subtract line 20 from line 19. If zero or less, enter -0- and skip lines 22 through 25	21	
22	Enter your basis in Roth IRA contributions (see page 7 of the instructions)	22	
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see page 7 of the instructions)	23	
24	Enter your basis in Roth IRA conversions (see page 7 of the instructions)	24	
25 a	Subtract line 24 from line 23. If zero or less, enter -0- and skip lines 25b and 25c	25a	
b	Amount on line 25a attributable to qualified hurricane distributions (see page 8 of the instructions). Also enter this amount on Form 8915, line 23	25b	
c	Taxable amount. Subtract line 25b from line 25a. If more than zero, also include this amount on Form 1040, line 15b; Form 1040A, line 11b; or Form 1040NR, line 16b	25c	

Sign Here Only If You Are Filing This Form by Itself and Not With Your Tax Return

Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete.

▶ Your signature ▶ Date

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code ▶	MCPHILLIPS, ROBERTS & DEANS, PLC 150 BOUSH STREET, SUITE 1100 NORFOLK VA 23510		EIN 757 640-7190

Form **8606** (2006)

Form **4952**Department of the Treasury
Internal Revenue Service (99)**Investment Interest Expense Deduction**▶ **Attach to your tax return.**

OMB No. 1545-0191

2006
Attachment
Sequence No. **51**

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Identifying number

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2006 (see instructions)	SEE STATEMENT 18.	1	78.
2	Disallowed investment interest expense from 2005 Form 4952, line 7		2	
3	Total investment interest expense. Add lines 1 and 2		3	78.

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	70,455.		
b	Qualified dividends included on line 4a	4b	8,171.		
c	Subtract line 4b from line 4a			4c	62,284.
d	Net gain from the disposition of property held for investment	4d	407,589.		
e	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment (see instructions)	4e	16,195.		
f	Subtract line 4e from line 4d			4f	391,394.
g	Enter the amount from lines 4b and 4e that you elect to include in investment income (see instructions)			4g	NONE
h	Investment income. Add lines 4c, 4f, and 4g			4h	453,678.
5	Investment expenses (see instructions)			5	NONE
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-			6	453,678.

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2007. Subtract line 6 from line 3. If zero or less, enter -0-	7	NONE
8	Investment interest expense deduction. Enter the smaller of line 3 or 6. See instructions	8	78.

Section references are to the Internal Revenue Code unless otherwise noted.

General Instructions**Purpose of Form**

Use Form 4952 to figure the amount of investment interest expense you can deduct for 2006 and the amount you can carry forward to future years. Your investment interest expense deduction is limited to your net investment income.

For more information, see Pub. 550, Investment Income and Expenses.

Who Must File

If you are an individual, estate, or a trust, you must file Form 4952 to claim a deduction for your investment interest expense.

Exception. You do not have to file Form 4952 if all of the following apply.

- Your investment income from interest and ordinary dividends minus any qualified dividends is more than your investment interest expense.
- You do not have any other deductible investment expenses.
- You do not have any carryover of disallowed investment interest expense from 2005.

Allocation of Interest Expense

If you paid or accrued interest on a loan and used the loan proceeds for more than one purpose, you may have to allocate the interest. This is necessary because different

rules apply to investment interest, personal interest, trade or business interest, home mortgage interest, and passive activity interest. See Pub. 535, Business Expenses.

Specific Instructions**Part I - Total Investment Interest Expense****Line 1**

Enter the investment interest expense paid or accrued during the tax year, regardless of when you incurred the indebtedness. Investment interest expense is interest paid or accrued on a loan or part of a loan that is allocable to property held for investment (as defined on this page).

Include investment interest expense reported to you on Schedule K-1 from a partnership or an S corporation. Include amortization of bond premium on taxable bonds purchased after October 22, 1986, but before January 1, 1988, unless you elected to offset amortizable bond premium against the interest payments on the bond. A taxable bond is a bond on which the interest is includible in gross income.

Investment interest expense does not include any of the following:

- Home mortgage interest.
- Interest expense that is properly allocable to a passive activity. Generally, a passive activity is any trade or business activity in which you do not materially participate and any rental activity. See the Instructions for Form 8582, Passive Activity Loss Limitations, for details.

- Any interest expense that is capitalized, such as construction interest subject to section 263A.

- Interest expense related to tax-exempt interest income under section 265.

- Interest expense, disallowed under section 264, on indebtedness with respect to life insurance, endowment, or annuity contracts issued after June 8, 1997, even if the proceeds were used to purchase any property held for investment.

Property held for investment. Property held for investment includes property that produces income, not derived in the ordinary course of a trade or business, from interest, dividends, annuities, or royalties. It also includes property that produces gain or loss, not derived in the ordinary course of a trade or business, from the disposition of property that produces these types of income or is held for investment. However, it does not include an interest in a passive activity.

Exception. A working interest in an oil or gas property that you held directly or through an entity that did not limit your liability is property held for investment, but only if you did not materially participate in the activity.

Part II - Net Investment Income**Line 4a**

Gross income from property held for investment includes income, unless derived in the ordinary course of a trade or business, from interest, ordinary dividends (except Alaska Permanent Fund dividends), annuities, and royalties. Include investment income

For Paperwork Reduction Act Notice, see back of form.

Form **4952** (2006)

Form **4562**Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2006Attachment
Sequence No. **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Business or activity to which this form relates

Identifying number

SUMMARY FORM 4562**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
(a) Description of property		(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2007. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2006	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B - Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.Form **4562** (2006)

Form **4562**Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2006Attachment
Sequence No. **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Business or activity to which this form relates

RITA A. COHEN

- SCHEDULE C

Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2007. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2006	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B - Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.Form **4562** (2006)

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☒ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☒ **Yes** ☐ **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (do not include commuting miles)	4,455.					
31 Total commuting miles driven during the year	NONE					
32 Total other personal (noncommuting) miles driven	11,545.					
33 Total miles driven during the year. Add lines 30 through 32	16,000.					
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?	X					
36 Is another vehicle available for personal use?	X					

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2006 tax year (see instructions):					
43 Amortization of costs that began before your 2006 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Form **4562**Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2006Attachment
Sequence No. **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

ANDREW COHEN & RITA COHEN

Business or activity to which this form relates

ANDREW 'S DREAMLAND, LLC

- SCHEDULE C

Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2007. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2006	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B - Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.Form **4562** (2006)

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?				<input type="checkbox"/> Yes <input type="checkbox"/> No	24b If "Yes," is the evidence written?				<input type="checkbox"/> Yes <input type="checkbox"/> No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
25 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25		
26 Property used more than 50% in a qualified business use:									
		%							
		%							
		%							
27 Property used 50% or less in a qualified business use:									
		%				S/L -			
		%				S/L -			
		%				S/L -			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29		

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2006 tax year (see instructions):					
43 Amortization of costs that began before your 2006 tax year					43 180.
44 Total. Add amounts in column (f). See the instructions for where to report					44 180.

COHEN

SCHEDULE C DEPRECIATION AND AMORTIZATION

AMORTIZATION

TD5204 -2YVG 04/09/2007 17:33:00 V06-5.4 7444

Name(s) shown on return
ANDREW COHEN & RITA COHEN

Identifying number

Section A - Regular Credit. Skip this section and go to Section B if you are electing or previously elected (and are not rev incremental credit).

1	Certain amounts paid or incurred to energy consortia (see instructions)	1	
2	Basic research payments to qualified organizations (see instructions)	2	
3	Qualified organization base period amount	3	
4	Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Wages for qualified services (do not include wages used in figuring the work opportunity credit)	5	
6	Cost of supplies	6	
7	Rental or lease costs of computers (see instructions)	7	
8	Enter the applicable percentage of contract research expenses (see instructions)	8	
9	Total qualified research expenses. Add lines 5 through 8	9	
10	Enter fixed-base percentage, but not more than 16% (see instructions)	10	%
11	Enter average annual gross receipts (see instructions)	11	
12	Multiply line 11 by the percentage on line 10	12	
13	Subtract line 12 from line 9. If zero or less, enter -0-	13	
14	Multiply line 9 by 50% (.50)	14	
15	Enter the smaller of line 13 or line 14	15	
16	Add lines 1, 4, and 15	16	
17a	Are you electing the reduced credit under Section 280C? ▶ Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes," and you are not electing the alternative simplified credit in Section C, multiply line 16 by 13% (.13). If "No," or you are electing the alternative simplified credit in Section C, multiply line 16 by 20% (.20). Also, see the instructions for the schedule that must be attached if you checked "No." Members of controlled groups or businesses under common control: see instructions for the schedule that must be attached	17a	
b	If your tax year ended after December 31, 2006, and you are electing the alternative simplified credit in Section C, multiply line 17a by the applicable 2006 percentage (see instructions)	17b	

Section B - Alternative Incremental Credit. Skip this section if you completed Section A.

18	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)	18	
19	Basic research payments to qualified organizations (see the line 2 instructions)	19	
20	Qualified organization base period amount (see the line 3 instructions)	20	
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	
22	Add lines 18 and 21	22	
23	Multiply line 22 by 20% (.20)	23	
24	Wages for qualified services (do not include wages used in figuring the work opportunity credit)	24	
25	Cost of supplies	25	
26	Rental or lease costs of computers (see the line 7 instructions)	26	
27	Enter the applicable percentage of contract research expenses (see the line 8 instructions)	27	
28	Total qualified research expenses. Add lines 24 through 27	28	
29	Enter average annual gross receipts (see the line 11 instructions)	29	
30	Multiply line 29 by 1% (.01)	30	
31	Subtract line 30 from line 28. If zero or less, enter -0-	31	
32	Multiply line 29 by 1.5% (.015)	32	
33	Subtract line 32 from line 28. If zero or less, enter -0-	33	
34	Subtract line 33 from line 31	34	
35	Multiply line 29 by 2% (.02)	35	
36	Subtract line 35 from line 28. If zero or less, enter -0-	36	
37	Subtract line 36 from line 33	37	

Section B - Alternative Incremental Credit (continued)

38	Multiply line 34 by 2.65% (.0265) (for a tax year ending after December 31, 2006, see instructions for percentage)	38	
39	Multiply line 37 by 3.2% (.032) (for a tax year ending after December 31, 2006, see instructions for percentage)	39	
40	Multiply line 36 by 3.75% (.0375) (for a tax year ending after December 31, 2006, see instructions for percentage)	40	
41	Add lines 23, 38, 39, and 40	41	
42a	Are you electing the reduced credit under Section 280C? ► Yes <input type="checkbox"/> No <input type="checkbox"/>		
	If "Yes," and you are not electing the alternative simplified credit in Section C, multiply line 41 by 65% (.65). If "No," or you are electing the alternative simplified credit in Section C, enter the amount from line 41. Also, see the line 17a instructions for the schedule that must be attached if you checked "No." Members of controlled groups or businesses under common control: see instructions for the schedule that must be attached	42a	
b	If your tax year ended after December 31, 2006, and you are electing the alternative simplified credit in Section C, multiply line 42a by the applicable 2006 percentage (see instructions)	42b	

Section C - Alternative Simplified Credit (for tax years ending after December 31, 2006). Also complete Section A or B.

43	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)	43	
44	Basic research payments to qualified organizations (see the line 2 instructions)	44	
45	Qualified organization base period amount (see the line 3 instructions)	45	
46	Subtract line 45 from line 44. If zero or less, enter -0-	46	
47	Add lines 43 and 46	47	
48	Multiply line 47 by 20% (.20)	48	
49	Wages for qualified services (do not include wages used in figuring the work opportunity credit)	49	
50	Cost of supplies	50	
51	Rental or lease costs of computers (see the line 7 instructions)	51	
52	Enter the applicable percentage of contract research expenses (see the line 8 instructions)	52	
53	Total qualified research expenses. Add lines 49 through 52	53	
54	Enter your total qualified research expenses for the prior 3 tax years. If you had no qualified research expenses in any one of those years, skip lines 55 and 56	54	
55	Divide line 54 by 6.0	55	
56	Subtract line 55 from line 53. If zero or less, enter -0-	56	
57	Multiply line 56 by 12% (.12). If you skipped lines 55 and 56, multiply line 53 by 6% (.06)	57	
58	Add lines 48 and 57	58	
59	Multiply line 58 by the applicable 2007 percentage (see instructions)	59	
60	Add line 17b or line 42b (whichever applies) and line 59	60	
61	Are you electing the reduced credit under Section 280C? ► Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes," multiply line 60 by 65% (.65). If "No," enter the amount from line 60 and see the line 17a instructions for the schedule that must be attached. Members of controlled groups or businesses under common control: see instructions for the schedule that must be attached	61	

Section D - Summary

62	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	62	42 .
63	If you did not complete Section C, add line 17a or line 42a (whichever applies) to line 62. If you completed Section C, add lines 61 and 62. Estates and trusts go to line 64; partnerships and S corporations, report this amount on Schedule K; all others, report this amount on line 1d of Form 3800	63	42 .
64	Amount allocated to beneficiaries of the estate or trust (see instructions)	64	
65	Estates and trusts: subtract line 64 from line 63. Report the credit on line 1d of Form 3800	65	

Form **8582****Passive Activity Loss Limitations**

OMB No. 1545-1008

2006Attachment
Sequence No. **88**Department of the Treasury
Internal Revenue Service (99)▶ See separate instructions.
▶ Attach to Form 1040 or Form 1041.

Name(s) shown on return

Identifying number

ANDREW COHEN & RITA COHEN

Part I 2006 Passive Activity Loss**Caution:** Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation see **Special Allowance for Rental Real Estate Activities** on page 3 of the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a		
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	()	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	()	
d Combine lines 1a, 1b, and 1c	1d		

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a	()	
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	()	
c Add lines 2a and 2b	2c	()	

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a		
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	(15,785.)	
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c	(8,934.)	
d Combine lines 3a, 3b, and 3c	3d		-24,719.

4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and schedules normally used	4		-24,719.
---	----------	--	----------

If line 4 is a loss and: ● Line 1d is a loss, go to Part II.

● Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.

● Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5	
6 Enter \$150,000. If married filing separately, see page 8	6	
7 Enter modified adjusted gross income, but not less than zero (see page 8)	7	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.		
8 Subtract line 7 from line 6	8	
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see page 8	9	
10 Enter the smaller of line 5 or line 9	10	
If line 2c is a loss, go to Part III. Otherwise, go to line 15.		

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities**Note:** Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12 Enter the loss from line 4	12	
13 Reduce line 12 by the amount on line 10	13	
14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	

Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15	
16 Total losses allowed from all passive activities for 2006. Add lines 10, 14, and 15. See pages 11 of the instructions to find out how to report the losses on your tax return	16	

Caution: The worksheets must be filed with your tax return. Keep a copy for your records.**Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c** (See pages 7 and 8 of the instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c ▶					

Worksheet 2 - For Form 8582, Lines 2a and 2b (See page 8 of the instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b ▶			

Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See page 8 of the instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
VIANIX LC		10,233.	6,231.		16,464.
ENVEST II LLC		5,552.	2,703.		8,255.
Total. Enter on Form 8582, lines 3a, 3b, and 3c ▶		15,785.	8,934.		

Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See page 9 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total ▶			1.00		

Worksheet 5 - Allocation of Unallowed Losses (See page 9 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
VIANIX LC	SCH E, 28A	16,464.	0.66604636	16,464.
ENVEST II LLC	SCH E, 28A	8,255.	0.33395364	8,255.
Total ▶		24,719.	1.00	24,719.

Worksheet 6 - Allowed Losses (See pages 9 and 10 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
VIANIX LC	SCH E, 28A	16,464.	16,464.	
ENVEST II LLC	SCH E, 28A	8,255.	8,255.	
Total		24,719.	24,719.	

Worksheet 7 - Activities With Losses Reported on Two or More Forms or Schedules (See pages 10 and 11 of the instructions.)

Name of Activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Total			1.00		

Form **8582** (2006)

Form **8582****Passive Activity Loss Limitations**

ALTERNATIVE MINIMUM TAX

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

2006Attachment
Sequence No. **88**Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Identifying number

ANDREW COHEN & RITA COHEN

Part I 2006 Passive Activity Loss**Caution:** Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation see **Special Allowance for Rental Real Estate Activities** on page 3 of the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a		
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	()	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	()	
d Combine lines 1a, 1b, and 1c	1d		

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a	()	
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b	()	
c Add lines 2a and 2b	2c	()	

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a		
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b	(15,558.)	
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c	(8,953.)	
d Combine lines 3a, 3b, and 3c	3d		-24,511.

4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and schedules normally used	4		-24,511.
---	----------	--	----------

If line 4 is a loss and: ● Line 1d is a loss, go to Part II.

● Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.

● Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5	
6 Enter \$150,000. If married filing separately, see page 8	6	
7 Enter modified adjusted gross income, but not less than zero (see page 8)	7	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.		
8 Subtract line 7 from line 6	8	
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see page 8	9	
10 Enter the smaller of line 5 or line 9	10	
If line 2c is a loss, go to Part III. Otherwise, go to line 15.		

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities**Note:** Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12 Enter the loss from line 4	12	
13 Reduce line 12 by the amount on line 10	13	
14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	

Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15	
16 Total losses allowed from all passive activities for 2006. Add lines 10, 14, and 15. See pages 11 of the instructions to find out how to report the losses on your tax return	16	

Caution: The worksheets must be filed with your tax return. Keep a copy for your records.**Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c** (See pages 7 and 8 of the instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c					

Worksheet 2 - For Form 8582, Lines 2a and 2b (See page 8 of the instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			

Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See page 8 of the instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
VIANIX LC		10,214.	6,250.		16,464.
ENVEST II LLC		5,344.	2,703.		8,047.
Total. Enter on Form 8582, lines 3a, 3b, and 3c		15,558.	8,953.		

Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See page 9 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total			1.00		

Worksheet 5 - Allocation of Unallowed Losses (See page 9 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
VIANIX LC	SCH E, 28A	16,464.	0.6716984	16,464.
ENVEST II LLC	SCH E, 28A	8,047.	0.3283016	8,047.
Total		24,511.	1.00	24,511.

Worksheet 6 - Allowed Losses (See pages 9 and 10 of the instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
VIANIX LC	SCH E, 28A	16,464.	16,464.	
ENVEST II LLC	SCH E, 28A	8,047.	8,047.	
Total		24,511.	24,511.	

Worksheet 7 - Activities With Losses Reported on Two or More Forms or Schedules (See pages 10 and 11 of the instructions.)

Name of Activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule . . ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Total			1.00		

Form **8582-CR****Passive Activity Credit Limitations**

OMB No. 1545-1034

2006Attachment
Sequence No. **89**Department of the Treasury
Internal Revenue Service▶ See separate instructions.
▶ Attach to Form 1040 or 1041.

Name(s) shown on return

Identifying number

ANDREW COHEN & RITA COHEN**Part I 2006 Passive Activity Credits****Caution:** If you have credits from a publicly traded partnership, see **Publicly Traded Partnerships (PTPs)** on page 15 of the instructions.**Credits From Rental Real Estate Activities With Active Participation (Other Than Rehabilitation Credits and Low-Income Housing Credits) (See Lines 1a through 1c on page 9.)**

1 a Credits from Worksheet 1, column (a)	1a	
b Prior year unallowed credits from Worksheet 1, column (b)	1b	
c Add lines 1a and 1b		1c

Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990) (See Lines 2a through 2c on page 9.)

2 a Credits from Worksheet 2, column (a)	2a	
b Prior year unallowed credits from Worksheet 2, column (b)	2b	
c Add lines 2a and 2b		2c

Low-Income Housing Credits for Property Placed in Service After 1989 (See Lines 3a through 3c on page 9.)

3 a Credits from Worksheet 3, column (a)	3a	
b Prior year unallowed credits from Worksheet 3, column (b)	3b	
c Add lines 3a and 3b		3c

All Other Passive Activity Credits (See Lines 4a through 4c on page 9.)

4 a Credits from Worksheet 4, column (a)	4a	42.
b Prior year unallowed credits from Worksheet 4, column (b)	4b	52.
c Add lines 4a and 4b	4c	94.

5 Add lines 1c, 2c, 3c, and 4c	5	94.
6 Enter the tax attributable to net passive income (see page 9)	6	NONE
7 Subtract line 6 from line 5. If line 6 is more than or equal to line 5, enter -0- and see page 10	7	94.

Note: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II, III, or IV. Instead, go to line 37.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Complete this part only if you have an amount on line 1c. Otherwise, go to Part III.

8 Enter the smaller of line 1c or line 7	8	
9 Enter \$150,000. If married filing separately, see page 10	9	
10 Enter modified adjusted gross income, but not less than zero (see page 10). If line 10 is equal to or more than line 9, skip lines 11 through 15 and enter -0- on line 16	10	
11 Subtract line 10 from line 9	11	
12 Multiply line 11 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see page 11	12	
13 a Enter the amount, if any, from line 10 of Form 8582	13a	
b Enter the amount, if any, from line 14 of Form 8582	13b	
c Add lines 13a and 13b	13c	
14 Subtract line 13c from line 12	14	
15 Enter the tax attributable to the amount on line 14 (see page 11)	15	
16 Enter the smaller of line 8 or line 15	16	

For Paperwork Reduction Act Notice, see page 16 of the instructions.

Form **8582-CR** (2006)

Part III Special Allowance for Rehabilitation Credits From Rental Real Estate Activities and Low-Income Housing Credits for Property Placed in Service Before 1990 (or From Pass-Through Interests Acquired Before 1990)
Note: Complete this part only if you have an amount on line 2c. Otherwise, go to Part IV.

17	Enter the amount from line 7	17	
18	Enter the amount from line 16	18	
19	Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 and 36, and then go to Part V	19	
20	Enter the smaller of line 2c or line 19	20	
21	Enter \$250,000. If married filing separately, see page 12. (See page 12 to find out if you can skip lines 21 through 26.)	21	
22	Enter modified adjusted gross income, but not less than zero. (See instructions for line 10 on page 10.) If line 22 is equal to or more than line 21, skip lines 23 through 29 and enter -0- on line 30	22	
23	Subtract line 22 from line 21	23	
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If married filing separately, see page 12	24	
25a	Enter the amount, if any, from line 10 of Form 8582	25a	
b	Enter the amount, if any, from line 14 of Form 8582	25b	
c	Add lines 25a and 25b	25c	
26	Subtract line 25c from line 24	26	
27	Enter the tax attributable to the amount on line 26 (see page 12)	27	
28	Enter the amount, if any, from line 18	28	
29	Subtract line 28 from line 27	29	
30	Enter the smaller of line 20 or line 29	30	

Part IV Special Allowance for Low-Income Housing Credits for Property Placed in Service After 1989
Note: Complete this part only if you have an amount on line 3c. Otherwise, go to Part V.

31	If you completed Part III, enter the amount from line 19. Otherwise, subtract line 16 from line 7	31	
32	Enter the amount from line 30	32	
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36	33	
34	Enter the smaller of line 3c or line 33	34	
35	Tax attributable to the remaining special allowance (see page 12)	35	
36	Enter the smaller of line 34 or line 35	36	

Part V Passive Activity Credit Allowed

37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. See page 12 to find out how to report the allowed credit on your tax return and how to allocate allowed and unallowed credits if you have more than one credit or credits from more than one activity. If you have any credits from a publicly traded partnership, see Publicly Traded Partnerships (PTPs) on page 15	37	NONE
----	---	----	------

Part VI Election To Increase Basis of Credit Property

38	If you disposed of your entire interest in a passive activity or former passive activity in a fully taxable transaction, and you elect to increase your basis in credit property used in that activity by the unallowed credit that reduced your basis in the property, check this box. See page 16	<input type="checkbox"/>
39	Name of passive activity disposed of	
40	Description of the credit property for which the election is being made	
41	Amount of unallowed credit that reduced your basis in the property	\$

Form **8283**

(Rev. December 2006)

Department of the Treasury
Internal Revenue Service**Noncash Charitable Contributions**▶ **Attach to your tax return if you claimed a total deduction
of over \$500 for all contributed property.**▶ **See separate instructions.**

OMB No. 1545-0908

Attachment
Sequence No. **155**

Name(s) shown on your income tax return

ANDREW COHEN & RITA COHEN

Identifying number

Note. Figure the amount of your contribution deduction before completing this form. See your tax return instructions.**Section A. Donated Property of \$5,000 or Less and Certain Publicly Traded Securities** - List in this section **only** items (or groups of similar items) for which you claimed a deduction of \$5,000 or less. Also, list certain publicly traded securities even if the deduction is more than \$5,000 (see instructions).**Part I Information on Donated Property** - If you need more space, attach a statement.

1 (a) Name and address of the donee organization		(b) Description of donated property (For a donated vehicle, enter the year, make, model, condition, and mileage, and attach Form 1098-C if required.)
A	PURPLE HEART SERVICE FOUNDATIO VIRGINIA	SUITCASE, CLOTHING, BOOKS
B	PURPLE HEART SERVICE FOUNDATIO VIRGINIA	CLOTHING
C	SAMARITAN VIRGINIA	CLOTHING, BOOKS, TOYS, FURNITURE
D		
E		

Note. If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (d), (e), and (f).

	(c) Date of the contribution	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) Fair market value (see instructions)	(h) Method used to determine the fair market value
A	04/04/2006	VAR	PURCHASE	1,875.	375.	THRIFT SHOP VALUE
B	04/04/2006	VAR	PURCHASE	4,125.	825.	THRIFT SHOP VALUE
C	02/20/2006	VAR	PURCHASE	2,800.	560.	THRIFT SHOP VALUE
D						
E						

Part II Partial Interests and Restricted Use Property - Complete lines 2a through 2e if you gave less than an entire interest in a property listed in Part I. Complete lines 3a through 3c if the conditions were placed on a contribution listed in Part I; also attach the required statement (see instructions).**2a** Enter the letter from Part I that identifies the property for which you gave less than an entire interest ▶ _____
If Part II applies to more than one property, attach a separate statement.**b** Total amount claimed as a deduction for the property listed in Part I: **(1)** For this tax year ▶ _____
(2) For any prior tax years ▶ _____**c** Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above):

Name of charitable organization (donee)

Address (number, street, and room or suite no.)

City or town, state, and ZIP code

d For tangible property, enter the place where the property is located or kept ▶ _____**e** Name of any person, other than the donee organization, having actual possession of the property ▶ _____**3a** Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property?

Yes No

b Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire?**c** Is there a restriction limiting the donated property for a particular use?

For Paperwork Reduction Act Notice, see separate instructions.

Form **8283** (Rev. 12-2006)JSA
6X6400 2.000

Name(s) shown on your income tax return

Identifying number

ANDREW COHEN & RITA COHEN

Section B. Donated Property Over \$5,000 (Except Certain Publicly Traded Securities) - List in this section only items (or groups of similar items) for which you claimed a deduction of more than \$5,000 per item or group (except contributions of certain publicly traded securities reported in Section A). An appraisal is generally required for property listed in Section B (see instructions).

Part I Information on Donated Property - To be completed by the taxpayer and/or the appraiser.**4** Check the box that describes the type of property donated:

<input type="checkbox"/>	Art* (contribution of \$20,000 or more)	<input type="checkbox"/>	Qualified Conservation Contribution	<input type="checkbox"/>	Equipment
<input type="checkbox"/>	Art* (contribution of less than \$20,000)	<input type="checkbox"/>	Other Real Estate	<input type="checkbox"/>	Securities
<input type="checkbox"/>	Collectibles**	<input type="checkbox"/>	Intellectual Property	<input type="checkbox"/>	Other

*Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects.

**Collectibles include coins, stamps, books, gems, jewelry, sports memorabilia, dolls, etc., but not art as defined above.

Note: In certain cases, you must attach a qualified appraisal of the property. See instructions.

5	(a) Description of donated property (if you need more space, attach a separate statement)	(b) If tangible property was donated, give a brief summary of the overall physical condition of the property at the time of the gift	(c) Appraised fair market value
A			
B			
C			
D			

(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) For bargain sales, enter amount received	See instructions (h) Amount claimed as a deduction	(i) Average trading price of securities
A					
B					
C					
D					

Part II Taxpayer (Donor) Statement - List each item included in Part I above that the appraisal identifies as having a value of \$500 or less. See instructions.

I declare that the following item(s) included in Part I above has to the best of my knowledge and belief an appraised value of not more than \$500 (per item). Enter identifying letter from Part I and describe the specific item. See instructions. ►

Signature of taxpayer (donor) ►

Date ►

Part III Declaration of Appraiser

I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by, or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons.

Also, I declare that I hold myself out to the public as an appraiser or perform appraisals on a regular basis; and that because of my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). In addition, I understand that a substantial or gross valuation misstatement resulting from the appraisal of the value of the property that I know, or reasonably should know, would be used in connection with a return or claim for refund, may subject me to the penalty under section 6695A. I affirm that I have not been barred from presenting evidence or testimony by the Office of Professional Responsibility.

Sign**Here** Signature ►

Title ►

Date ►

Business address (including room or suite no.)

Identifying number

City or town, state, and ZIP code

Part IV Donee Acknowledgment - To be completed by the charitable organization.

This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on the following date ►

Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described in Section B, Part I (or any portion thereof) within 3 years after the date of receipt, it will file **Form 8282**, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value.

Does the organization intend to use the property for an unrelated use? ► ☐ Yes ☐ No

Name of charitable organization (donee)

Employer identification number

Address (number, street, and room or suite no.)

City or town, state, and ZIP code

Authorized signature

Title

Date

SUPPLEMENT TO FORM 1040

SOURCES OF COMPENSATION

OWNER-SHIP	DESCRIPTION	TOTAL WAGES	FEDERAL WITHHELD	SOC. SEC. WITHHELD	MEDICARE WITHHELD
WAGES					
S	LARCHMONT UNITED	2,304.		143.	33.
S	VIRGINIA OPERA ASSOCIATIO	2,320.	77.	144.	34.
TOTAL - WAGES		4,624.	77.	287.	67.

GRAND TOTAL	4,624.	77.	287.	67.
-------------	--------	-----	------	-----

OWNER-SHIP	WITHHOLDING FROM WAGES	STATE WITHHELD	CITY/LOCAL WITHHELD
S	LARCHMONT UNITED		
S	VIRGINIA OPERA ASSOCIATIO	57.	
TOTAL WITHHOLDING FROM WAGES		57.	

QUALIFIED DIVIDENDS

QUALIFIED DIVIDENDS FROM FORM 1099

T VANGUARD - INTL STOCK INDEX	1,047.
T VANGUARD - STOCK MKT IDX ADM	3,213.
T AMERITRADE	3,911.
TOTAL FORM 1099 QUALIFIED DIVIDENDS	8,171.

SUPPLEMENT TO FORM 1040

TOTAL TO 1040, LINE 9B

8,171.

=====

PENSIONS AND ANNUITIES

=====

OWNER- SHIP	DESCRIPTION	TOTAL RECEIVED	TAXABLE PORTION
T	STATE STREET RETIREMENT	10,176.	10,176.
TOTAL (FORM 1040, PAGE 1, LINE 16)		10,176.	10,176.

SUPPLEMENT TO FORM 1040

TAXABLE STATE/LOCAL TAX REFUNDS

ALLOCATION OF STATE/LOCAL TAX REFUND PAID OVER TWO YEARS:

1	TAXES PAID IN 2005	11,258.
2	TAXES PAID IN 2006	8,750.
3	TOTAL STATE AND LOCAL TAX PAYMENTS ON 2005 RETURN	20,008.
4	TOTAL REFUND RECEIVED IN 2006	10,010.
5	PERCENTAGE OF TAXES PAID IN 2005 (LINE 1/LINE 3)	56.27%
6	REFUND ATTRIBUTABLE TO TAXES PAID IN 2005	5,633.
7	PERCENTAGE OF TAXES PAID IN 2006 (LINE 2/LINE 3)	43.73%
8	REFUND ATTRIBUTABLE TO TAXES PAID IN 2006	4,377.

TAXABLE REFUND:

1	REFUND ATTRIBUTABLE TO TAXES PAID IN 2005	5,633.
2	2005 ALLOWABLE ITEMIZED DEDUCTIONS	34,241.
3	2005 BASIC STANDARD DEDUCTION:	
	\$5,000, IF SINGLE	
	\$10,000, IF MFJ OR QUALIFYING WIDOW(ER)	
	\$5,000, IF MARRIED FILING SEPARATELY	10,000.
	\$7,300, IF HEAD OF HOUSEHOLD	
4	2005 ADDITIONAL STANDARD DEDUCTION(S)	
5	LINE 3 PLUS LINE 4	10,000.
6	LINE 2 LESS LINE 5	24,241.
7	TAXABLE TAX REFUNDS (SMALLER OF LINES 1 OR 6)	5,633.

SUPPLEMENT TO FORM 1040

PERSONAL EXEMPTION WORKSHEET

1. IS THE AMOUNT ON FORM 1040, LINE 38 GREATER
THAN AMOUNT SHOWN ON LINE 4 BELOW FOR YOUR
FILING STATUS? IF YES, GO TO LINE 2.

2. TOTAL EXEMPTIONS MULTIPLIED BY \$ 3,300 13,200.

3. ADJUSTED GROSS INCOME 475,933.

4. FILING STATUS INCOME LIMIT 225,750.

5. LINE 3 LESS LINE 4 250,183.

6. IS LINE 5 GREATER THAN \$122,500 (\$61,250 FOR MFS)?

X YES MULTIPLY \$1,100 BY THE TOTAL NUMBER OF EXEMPTIONS.
ENTER THE RESULT ON FORM 1040, LINE 42.

4400

NO DIVIDE LINE 5 BY 2,500 (1,250 IF MFS).IF THE RESULT IS
NOT A WHOLE NUMBER, INCREASE TO THE NEXT WHOLE NUMBER.

7. LINE 6 X 0.02

8. LINE 2 MULTIPLIED BY LINE 7

9. DIVIDE LINE 8 BY 1.5

10.DEDUCTION FOR EXEMPTIONS (LINE 2 LESS LINE 9) 4,400.

SUPPLEMENT SCHEDULE FOR FORM 2210

FIGURE THE PENALTY (FORM 2210, PART IV, SECTION B)

UNDERPAYMENT	BEG. DATE	END. DATE	DAYS	%	PENALTY
04/15/2006 - LINE 28, COLUMN (A)					
11,124.	04/15/2006	06/15/2006	61	7.0	130.
TOTAL TO FORM 2210, LINE 28, COLUMN (A)					130.
06/15/2006 - LINE 28, COLUMN (B)					
22,247.	06/15/2006	06/30/2006	15	7.0	64.
TOTAL TO FORM 2210, LINE 28, COLUMN (B)					64.
06/15/2006 - LINE 30, COLUMN (B)					
22,247.	06/30/2006	09/15/2006	77	8.0	375.
5,228.	09/15/2006	11/10/2006	56	8.0	64.
TOTAL TO FORM 2210, LINE 30, COLUMN (B)					439.
09/15/2006 - LINE 30, COLUMN (C)					
28,143.	09/15/2006	11/10/2006	56	8.0	345.
TOTAL TO FORM 2210, LINE 30, COLUMN (C)					345.
01/15/2007 - LINE 30, COLUMN (D)					
28,142.		04/15/2006	714	8.0	NONE
11,123.	04/15/2006	06/15/2006	61	8.0	149.
5,228.	06/15/2006	11/10/2006	148	8.0	170.
TOTAL TO FORM 2210, LINE 30, COLUMN (D)					319.

SUPPLEMENT TO SCHEDULE A

MEDICAL AND DENTAL EXPENSES

MEDICAL	3,463.
DOCTOR	2,761.
MEDICINE	1,440.
MEDICAL MASSAGE THERAPY	4,910.
INSURANCE	3,150.
MEDICAL MILES @.18 MI	90.

TOTAL TO SCHEDULE A, LINE 1	15,814.
-----------------------------	---------

HOME MORTGAGE INTEREST NOT REPORTED ON FORM 1098

OTHER MORTGAGE INTEREST NOT REPORTED ON FORM 1098	3,143.
---	--------

TOTAL TO SCHEDULE A, LINE 11	3,143.
------------------------------	--------

INVESTMENT INTEREST EXPENSE

AMERITRADE	78.
------------	-----

SUBTOTAL OF INVESTMENT INTEREST EXPENSE	78.
---	-----

LESS: DISALLOWED INVESTMENT INTEREST EXP./FORM 4952	NONE
---	------

TOTAL TO SCHEDULE A, LINE 13	78.
------------------------------	-----

CASH CONTRIBUTIONS

PARTNERSHIP/S CORPORATION/ESTATE AND TRUST

50% ORGANIZATION(S)

VIANIX LC	24.
-----------	-----

OTHER CASH CONTRIBUTIONS

CONTINUED...

STATEMENT 6

SUPPLEMENT TO SCHEDULE A
=====CASH CONTRIBUTIONS (CONT'D)

50% ORGANIZATION(S)

CHESAPEAKE BAY FOUNDATION	1,000.
MISCELLANEOUS	920.
OLD DONATION CENTER	500.
SIMON WIESENTHAL	386.
WHRO	500.

TOTAL CASH CONTRIBUTIONS BEFORE LIMITATION	3,330.
--	--------

CASH CONTRIBUTION LIMITATION	NONE
------------------------------	------

TOTAL TO SCHEDULE A, LINE 15A	3,330.
-------------------------------	--------

=====

NONCASH CHARITABLE CONTRIBUTIONS

NONCASH CONTRIBUTIONS FROM FORM 8283	1,760.
--------------------------------------	--------

TOTAL NONCASH CONTRIBUTIONS BEFORE LIMITATION	1,760.
---	--------

NONCASH CONTRIBUTION LIMITATION	NONE
---------------------------------	------

TOTAL TO SCHEDULE A, LINE 16	1,760.
------------------------------	--------

=====

OTHER MISC. DEDUCTIONS SUBJECT TO 2% LIMIT

PARTNERSHIP, S CORPORATION AND ESTATE AND TRUST	7,645.
---	--------

TOTAL TO SCHEDULE A, LINE 22	7,645.
------------------------------	--------

=====

SUPPLEMENT TO SCHEDULE A

ITEMIZED DEDUCTION WORKSHEET

1. SCHEDULE A, LINES 4, 9, 14, 18, 19, 26, AND 27	30,332.
2. SCHEDULE A, LINES 4, 13, 19, AND GAMBLING AND CASUALTY OR THEFT LOSSES INCLUDED ON LINE 27	78.
3. LINE 1 LESS LINE 2	30,254.
4. LINE 3 MULTIPLIED BY 80%	24,203.
5. ADJUSTED GROSS INCOME	475,933.
6. \$150,500 (\$75,250/MARRIED FILING SEP.)..	150,500.
7. LINE 5 LESS LINE 6	325,433.
8. LINE 7 MULTIPLIED BY 3%	9,763.
9. SMALLER OF AMOUNTS ON LINES 4 OR 8	9,763.
10. LINE 9 DIVIDED BY 3	3,254.
11. LINE 9 LESS LINE 10	6,509.
12. TOTAL ITEMIZED DEDUCTIONS (LINE 1 LESS LINE 11)	23,823.

SUPPLEMENT TO SCHEDULE C

GROSS RECEIPTS OR SALES - SCHEDULE C, LINE 1

BUSINESS NAME: RITA A. COHEN

PARAGON RAGTIME ORCHESTRA	2,500.
VIRGINIA ARTS FESTIVAL	1,000.

TOTAL TO SCHEDULE C, LINE 1	3,500.
-----------------------------	--------

CAR AND TRUCK EXPENSES - SCHEDULE C, LINE 9

STANDARD MILEAGE RATE METHOD

BUSINESS NAME: RITA A. COHEN

VEHICLE 1

BUSINESS MILES	4,455.
X	0.445

1,982.

STANDARD MILEAGE FOR THIS VEHICLE	1,982.
-----------------------------------	--------

TOTAL TO SCHEDULE C, LINE 9	1,982.
-----------------------------	--------

SUPPLEMENT TO SCHEDULE C

=====

OTHER COSTS - SCH. C PART III, LINE 39

=====

BUSINESS NAME: ANDREW'S DREAMLAND, LLC

ADDITIONAL BUILDING COSTS POST SALE	10,730.

TOTAL TO SCHEDULE C, LINE 39	10,730.
	=====

SUPPLEMENT TO SCHEDULE D

=====

PART II LONG-TERM CAPITAL GAINS AND LOSSES - ASSETS HELD MORE THAN ONE YEAR
LINE 12 - LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES

ACTIVITY NAME	GAIN/LOSS
-----	-----
ENVEST II LLC	28,966.

TOTAL LONG-TERM GAINS AND LOSSES FROM K-1'S	28,966.

TOTAL TO SCHEDULE D, LINE 12	28,966.
	=====

SUPPLEMENT TO SCHEDULE D

PART II LONG-TERM CAPITAL GAINS AND LOSSES
LINE 13 CAPITAL GAIN DISTRIBUTIONS

NAME OF PAYER	CAPITAL GAINS
AMERITRADE	327.
SUBTOTAL FROM CONSOLIDATED-1099	327.
TOTAL TO SCHEDULE D, LINE 13	327.

SUPPLEMENT TO SCHEDULE E

PART II, INCOME OR LOSS FROM PARTNERSHIPS AND S CORPORATIONS
COLUMNS (F) & (G) - PASSIVE INCOME OR LOSS

K-1 NAME: VIANIX LC
ID NUMBER: [REDACTED]

DESCRIPTION	INCOME/LOSS
ORDINARY INCOME OR LOSS	-10,233.
LESS:	
SUSPENDED LOSS CARRYOVER	6,231.
PLUS:	
DISALLOWED PASSIVE LOSS	16,464.
ALLOWABLE INCOME/LOSS	NONE

K-1 NAME: ENVEST II LLC
ID NUMBER: [REDACTED]

DESCRIPTION	INCOME/LOSS
ORDINARY INCOME OR LOSS	-3,752.
OTHER RENTAL INCOME OR LOSS	-1,789.
LESS:	
OTHER	11.
NET INCOME/LOSS BEFORE LIMITATIONS	-5,552.
LESS:	
SUSPENDED LOSS CARRYOVER	2,703.
PLUS:	
DISALLOWED PASSIVE LOSS	8,255.
ALLOWABLE INCOME/LOSS	NONE

SUPPLEMENT TO FORM 6198

ACTIVITY NAME VIANIX LC

	LOSS	RATIO	DEDUCTIBLE LOSS	AT-RISK ADJUSTMENT
OPERATING LOSS	10,233.	0.9944606	10,233.	
NON-DEDUCTIBLE EXPENSE C/O	33.	0.0032070	33.	
CHARITABLE CONTRIB. - 50%	24.	0.0023324	24.	
TOTAL	10,290.	1.000	10,290.	

TOTAL DEDUCTIBLE LOSS

DEDUCTIBLE LOSS FROM FORM 6198, LINE 21 9,321.

INCOME/GAINS USED TO OFFSET ADDITIONAL LOSSES:

OTHER INCOME OR GAINS 969.

DEDUCTIBLE LOSS 10,290.

SUPPLEMENT TO FORM 6198AMT

ACTIVITY NAME VIANIX LC

	LOSS	RATIO	DEDUCTIBLE LOSS	AT-RISK ADJUSTMENT
ORDINARY LOSS	10,214.	0.9944504	10,214.	
NON-DEDUCTIBLE EXPENSE C/O	33.	0.0032129	33.	
CHARITABLE CONTRIB. - 50%	24.	0.0023367	24.	
TOTAL	10,271.	1.000	10,271.	

TOTAL DEDUCTIBLE LOSS

DEDUCTIBLE LOSS FROM FORM 6198AMT, LINE 21 9,302.

INCOME/GAINS USED TO OFFSET ADDITIONAL LOSSES:

OTHER INCOME OR GAINS 969.

DEDUCTIBLE LOSS 10,271.

SUPPLEMENT TO FORM 6251

LINE 29 - EXEMPTION WORKSHEET

=====			
1.	\$42,500. IF SINGLE OR HEAD OF HOUSEHOLD		
	\$62,550. IF MARRIED FILING JT. OR QUAL. WIDOW(ER)		62,550.
	\$31,275. IF MARRIED FILING SEPARATELY		
2.	ALTERNATIVE MINIMUM TAXABLE INCOME, LINE 28	461,989.	
3.	\$112,500. IF SINGLE OR HEAD OF HOUSEHOLD		
	\$150,000. IF MFJ OR QUAL. WIDOW(ER)	150,000.	
	\$ 75,000. IF MARRIED FILING SEPARATELY	-----	
4.	LINE 2 LESS LINE 3	311,989.	
5.	MULTIPLY LINE 4 BY 25%		77,997.

6.	EXEMPTION AMOUNT (LINE 1 LESS LINE 5)		NONE
			=====

SUPPLEMENT TO FORM 6251

LINE 42 - WORKSHEET

=====

1. AMOUNT FROM FORM 6251, LINE 41	437,623.
2. LINE 1 MULTIPLIED BY 28%	122,534.
3. \$3,500 OR \$1,750 IF MARRIED FILING SEPARATELY	3,500.

4. TOTAL TO FORM 6251, LINE 42 (LINE 2 LESS LINE 3)	119,034.
	=====

LINE 54 - WORKSHEET

=====

1. AMOUNT FROM FORM 6251, LINE 36	461,989.
2. LINE 1 MULTIPLIED BY 28%	129,357.
3. \$3,500 OR \$1,750 IF MARRIED FILING SEPARATELY	3,500.

4. TOTAL TO FORM 6251, LINE 54 (LINE 2 LESS LINE 3)	125,857.
	=====

SUPPLEMENT TO FORM 4952

=====

DETAIL OF INVESTMENT INTEREST EXPENSE

DESCRIPTION	CURRENT YEAR INV. INT.	PRIOR YEAR DISALLOWED INV. INT.
-----	-----	-----
AMERITRADE	78.	
	-----	-----
TOTAL INVESTMENT INTEREST EXPENSE	78.	
	=====	=====

SUPPLEMENT TO FORM 4952

GAIN FROM INVESTMENT PROPERTIES

	ORDINARY GAIN	SHORT TERM LOSS	GAIN	LONG TERM LOSS	GAIN
CAP. GAIN DIST					327.
SCHEDULE D			391,394.	13,098.	28,966.
TOTAL			391,394.	13,098.	29,293.

NET GAIN - PROPERTY HELD FOR INVESTMENT - FORM 4952 LINE 4D	407,589.
---	----------

ELECTION TO INCLUDE QUAL.DIV.& NET CAP.GAIN AS INV.INCOME

GROSS INCOME EXCLUDING QUAL. DIV. - FORM 4952 LINE 4C	62,284.
ORDINARY GAIN - PROPERTY HELD FOR INVESTMENT	391,394.
TOTAL INCOME BEFORE CAPITAL GAIN	453,678.
TOTAL INVESTMENT INTEREST EXPENSES - FORM 4952 LN. 3	78.
INVESTMENT EXPENSES - FORM 4952 LINE 5	NONE
TOTAL EXPENSES	78.
EXCESS TOTAL EXPENSES OVER TOTAL INCOME	NONE
QUALIFIED DIVIDENDS	8,171.
NET LONG-TERM CAPITAL GAIN - INVESTMENT PROPERTY	16,195.
NET SHORT-TERM CAPITAL LOSS - INVESTMENT PROPERTY	NONE
NET CAPITAL GAIN	16,195.
NET CAPITAL GAIN YOU MAY ELECT TO REPORT AS ORDINARY	NONE
QUALIFIED DIVIDENDS YOU MAY ELECT TO INCLUDE IN INV. INC.	NONE
NET CAPITAL GAIN ELECTED TO BE REPORTED AS ORDINARY	NONE
QUALIFIED DIVIDENDS ELECTED TO BE INCLUDED IN INV. INC.	NONE

CONTINUED...

STATEMENT 19

SUPPLEMENT TO FORM 4952

=====

ELECTION TO INCLUDE QUAL.DIV.& NET CAP.GAIN AS INV.INCOME (CONT'D)

TOTAL ELECTION TO BE INCLUDED IN INVESTMENT INCOME
- FORM 4952 LINE 4G

NONE
=====

SUPPLEMENT TO FORM 4952

DETAIL OF INVESTMENT INCOME MINUS EXPENSES

1. CHILD'S INCOME FROM FORM 8814		
2. INTEREST INCOME	1,409.	
3. DIVIDEND INCOME	67,639.	
4. ANNUITIES		
5. ROYALTY INCOME.....		
6. K-1 SOURCES INVESTMENT INCOME	1,407.	

7. GROSS INVESTMENT INCOME		70,455.
8. QUALIFIED DIVIDENDS		8,171.

9. GROSS INVESTMENT INCOME EXCLUDING QUALIFIED DIV.		62,284.
10. ORDINARY SECTION 1245, 1250 & 1254 INCOME		
11. NET CAPITAL GAIN FROM INVESTMENT PROPERTY	16,195.	
12. NET GAIN FROM INVESTMENT PROPERTY	407,589.	
13. LINE 12 LESS LINE 11		391,394.
14. INVESTMENT INCOME ELECTION		NONE

15. TOTAL INVESTMENT INCOME		453,678.
16. ROYALTY EXPENSES		
17. INVESTMENT EXPENSES	NONE	

18. TOTAL INVESTMENT EXPENSES		NONE

19. TOTAL NET INVESTMENT INCOME		453,678.
		=====

SUPPLEMENT TO FORM 8582-CR

=====

TAX ATTRIBUTABLE TO PASSIVE INCOME - LINE 6

TOTAL TAX LIABILITY NONE

TAXABLE INCOME INCLUDING PASSIVE INCOME

LESS: NET PASSIVE INCOME FROM FORM 8582

PLUS: LOSSES FROM DISPOSITION

INCOME WITHOUT PASSIVE INCOME

LESS: TAX ON NON-PASSIVE INCOME NONE

TAX ATTRIBUTABLE TO PASSIVE INCOME, LINE 6 NONE

=====

McPHILLIPS, ROBERTS & DEANS, PLC

CERTIFIED PUBLIC ACCOUNTANTS

MEMBERS

TOWN POINT CENTER, SUITE 1100
NORFOLK, VIRGINIA 23510

POST OFFICE BOX 1180

AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

VIRGINIA SOCIETY OF CERTIFIED
PUBLIC ACCOUNTANTS

NATIONAL ASSOCIATED
CERTIFIED PUBLIC
ACCOUNTING FIRMS

NORFOLK, VIRGINIA 23501-1180

(757) 640-7190

FAX (757) 640-7297

ANDREW COHEN & RITA COHEN
INSTRUCTIONS FOR FILING FORM
760

2006 VIRGINIA RESIDENT INCOME TAX RETURN

SIGNATURE..

THE ORIGINAL RETURN SHOULD BE SIGNED (USE FULL NAME) AND DATED ON
PAGE 2 BY THE TAXPAYER AND SPOUSE.

OVERPAYMENT..

YOUR RETURN SHOWS A \$3,731. OVERPAYMENT. OF THIS AMOUNT, \$3,731. WILL
BE REFUNDED TO YOU.

FILING..

FILE YOUR SIGNED RETURN BY MAY 1, 2007 WITH:

DEPARTMENT OF TAXATION
P.O. BOX 1498
RICHMOND, VA 23218-1498

MAILING..

YOUR RETURN SHOULD BE MAILED BY EITHER REGISTERED OR CERTIFIED
MAIL, WITH THE SENDER'S RECEIPT POSTMARKED TO PROVE MAILING BEFORE
THE DUE DATE.



ANDREW COHEN
RITA COHEN
3750 JEFFERSON BOULEVARD

VIRGINIA BEACH VA 23455

Filing Status: 2 Federal Earned Income Credit Head of House-hold:
Exemptions Dependents Total 65 and over Blind Total
Yourself 1 2 4
Spouse 1

Vendor ID: 1062W 1062

1. Fed Adj Gross Income 1. 475933.
2. Additions, see pg 2, line 3 2. 7.
3. Subtotal 475940.
4a. Age Deduction - You 4a.
4b. Age Deduction - Spouse 4b.
5. Soc Sec & Tier 1 Railroad 5.
6. State Inc Tax Overpayment 6. 5633.
7. Other Subtractions, see pg 2, line 7 7. 4000.
8. Subtotal Subtractions 8. 9633.
9. Total VAGI 466307.
10a. Federal Sch. A Itemized Deductions 10a. 23823.
10b. State/Local Income Tax 10b. 10543.
10. Deductions 10. 13280.
11. Exemptions 11. 3600.
12. Child/Dependent Care 12.
13. Subtotal 13. 16880.
14. VA Taxable Income 14. 449427.
15. Tax Amt. 15. 25585.
16. Spouse Tax Adjustment 16. 259.

Name or Filing Change: Accelerated Refund: X
Address Change: Amended: NOL:
Virginia Return Not Filed Last Year: Locality: 810
Your SSN COHE
Spouse's SSN COHE
16a. Your VAGI 16a. 302889.
16b. Spouse's VAGI 16b. 163418.
17. Net Tax 17. 25326.
18a. Your Withholding 18a.
18b. Spouse's Withholding 18b. 57.
19. Estimated Payments 19. 9000.
20. Extension Payments 20.
21. Credit for Low Income 21.
22. Credit tax paid another state 22.
23. Other Credits 23. 20000.
24. Total Payments /Credits 24. 29057.
25. Tax you Owe 25.
26. Overpayment Amount 26. 3731.
27. Amount to Credit to Next Year's Tax 27.
28. Adjustments/Contributions 28.
Amount You Owe:
Paid by Credit Card
Refund: 3731.
Bank Routing Number
Bank Account Number

VA760CG

Page 2 - Year 2006

ANDREW

COHEN

**ADDITIONAL FILING INFORMATION**

Farming/Fishing, Merchant Seaman: Coalfield Enhancement

Taxpayer Deceased: Fixed Date Conformity:

Dependent on another's return: Overseas when due:

Spouse's Name - Filing Status 3 Only

Tax Credit for Low Income Individuals or VA Earned Income Credit

8. Exemption Information Social Security Number VAGI

a.
b.
c.
d.

g. Total Family VAGI 8g. ●

9. Total Exemptions 9. ●

11. Form 760 exemptions multiplied by \$300 11.

11a. Federal Earned Income Credit 11a. ●

11b. Multiply Line 11 by 20% (.20) 11b.

11c. Greater of Line 11 or Line 11b 11c.

12. Credit (Lesser of Line 11c above or Page 1, Line 17) 12.

Preparer Info

Phone You 7574608625

Spouse

Additions - SCH ADJ/CG - Part 11. Interest on obligations of other state 1.
2. Other Additions: 7.
a. Fixed Date Conformity 2a.

3. Total Additions: 3. 7.

Subtractions4. Income from obligations or securities of the U.S. 4.
5. Disability Income reported as wages 5.6. Other: 6a.
a. Fixed Date Conformity 6a. 00
6b. 4000.

7. Total Subtractions: 4000.

AGE DEDUCTION DETAILS

You

Spouse

Dept of Taxation can discuss my return with my preparer.

X

Preparer Phone Number 7576407190

I (We), the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return.

Preparer Signature _____ Date _____

Your Signature _____ Date _____

MCPHILLIPS, ROBERTS & DEANS, PLC
150 BOUSH STREET, SUITE 1100
NORFOLK, VA 23510

Spouse's Signature _____ Date _____

File by May 1, 2007

6B5612 3.000

1062

TD5204 2YVG 04/09/2007 17:33:00 V06-5.4 7444

ANDREW

COHEN

Credit for Tax Paid to Another State

Border State Rule

13a. Enter the filing status claimed on the
other state's tax return.

13a.

13b. Enter the number below to identify the
person claiming the credit

1. You 2. Spouse 3. Joint

13b.

13. Qualifying taxable income on which
the other state's tax is based 13.

14. Virginia Taxable Income

14.

15. Qualifying tax owed to the other state

15.

a. Name of state:

15a.

16. Virginia Income Tax

16.

17. Income percentage

17.

18. Virginia Income Tax multiplied
by Income percentage

18.

19. Credit Allowed

19.

Adjustments to Amount of Tax

20. Addition to Tax

20.

a. Addition from Form 760C

b. Addition from Form 760F

21. Penalty

21.

a. Late Filing/Payment
Penalty

b. Extension Penalty

22. Interest

22.

23. Consumer's Use Tax

23.

24. Voluntary Contributions
from overpaid taxes

24a.

24b.

25. Other Voluntary Contributions

25a.

25b.

School Foundation Contributions

25c.

25d.

26. Total Adjustments

Amended Returns27. Amount paid with original
return, plus additional tax
paid after it was filed

27.

28. Add line 27 from above
and line 24 from Form 760,
enter here

28.

29. Overpayment, if any, as
shown on original return
or as previously adjusted

29.

30. Subtract line 29 from line 28

30.

31. Tax You Owe

31.

32. Tax You Overpaid

32.

**Credit for Political Contributions
From Part XXIII, of Schedule CR**105. Enter 50% of the amount of eligible
political contributions

105.

106. Credit allowable this year

106.

If the Credit for Political Contributions is the **ONLY**
credit claimed on Schedule CR, you are not required
to send the Schedule CR with your return.

AVOID DELAYS. If this schedule contains information always submit with your return.

2006 Virginia Schedule FED

ANDREW COHEN
 RITA COHEN
 3750 JEFFERSON BOULEVARD

VIRGINIA BEACH

VA 23455

810

SCHEDULE C, SCHEDULE C-EZ and/or SCHEDULE F INFORMATION

1. Schedule Name	First Schedule Info. C	Second Schedule Info. C
2. Gross Receipts or Sales	3500.	
3. Depreciation / expense deduction		
4. Business Activity Code	711510	236100
5. Business Locality Code		
6. Car and truck expenses	1982.	
7. Inventory at end of year		
8. Number of miles you used your vehicle for: Business	4455	
9. Number of miles you used your vehicle for: Commuting	NONE	
10. Number of miles you used your vehicle for: Other	11545	

SCHEDULE 2106 and/or SCHEDULE 2106-EZ INFORMATION

11. Number of miles you used your vehicle for: Business	4455
12. Number of miles you used your vehicle for: Commuting	NONE
13. Number of miles you used your vehicle for: Other	11545
14. Percent of business use of vehicle: Vehicle 1	2784
15. Percent of business use of vehicle: Vehicle 2	

SCHEDULE 4562 INFORMATION

16. Property Used more than 50% in a qualified business use: Type of property
17. Date placed in service
18. Business/investment use percentage
19. Cost or other basis
20. Depreciation deduction
21. Elected section 179 cost
22. Business Locality Code

Report all W2's and 1099's with Virginia Withholding



ANDREW

COHEN

RITA

COHEN

Your/ Spouse SSN	You/ Spouse	Virginia Withholding	Employer FEIN	Virginia Account Number	Virginia Wages, tips, other comp.
[REDACTED]	1		0 [REDACTED]		10176.
[REDACTED]	2		5 [REDACTED]	[REDACTED]	2304.
[REDACTED]	2	57.	5 [REDACTED]	0 [REDACTED]	2320.

Total Virginia Withholding:

SSN

VA Withholding

YOU

SPOUSE

57.

TOTAL NUMBER OF W2'S AND 1099'S

04

AVOID DELAYS in processing your return! Be sure to enter all information including Employer's FEIN.

Spouse Tax Adjustment Worksheet

Be sure to enter the Virginia Adjusted Gross Income for each spouse on Lines 16a & 16b of Form 760.

PART 1: SEPARATE YOUR INCOME AND EXEMPTIONS

1. Enter the portion of the Virginia Adjusted Gross Income (VAGI) on Line 9 of Form 760 that is related to each spouse . . .

Use the worksheet at the bottom of the page to compute the separate VAGI for each spouse.

2. Enter separate personal exemption amounts. Enter a 1 in the boxes that apply and multiply the total by \$800.

Add \$900 to the total to compute the personal exemptions for you and spouse.

	65 or over	Blind	Total					You	Spouse
You:	<input type="text"/>	<input type="text"/>	=	<input type="text"/>	x \$800 =	<input type="text"/>	+ \$900 =	302889.	163418.
Spouse:	<input type="text"/>	<input type="text"/>	=	<input type="text"/>	x \$800 =	<input type="text"/>	+ \$900 =	900.	900.
3. Subtract Line 2 from Line 1. If either amount is 0 or less, stop here; you do not qualify for this credit								301989.	162518.

PART 2: CALCULATE YOUR TAX ADJUSTMENT

4. Enter the taxable income from Line 14 on Form 760 449427.
5. Enter the smaller amount from Line 3 above. **If this amount is larger than \$17,000 and Line 4 is larger than \$34,000, skip to Line 12 and enter \$259 as the credit.** 162518.
6. Subtract Line 5 from Line 4 (if \$0 or less, enter \$0) 286909.
7. Divide the amount on Line 4 by 2 224714.
8. Enter the tax on the **smaller** amount from Line 5 or Line 7. Refer to the tax table or rate schedule 9087.
9. Enter the tax on the **larger** amount from Line 6 or Line 7. Refer to the tax table or rate schedule 16240.
10. Add Lines 8 and 9 25327.
11. Enter the tax from Line 15 on Form 760 25585.
12. **TAX ADJUSTMENT:** Subtract Line 10 from Line 11. Enter this amount on Line 16 of Form 760 259.

The Spouse Tax Adjustment cannot exceed \$259

Worksheet for Determining Separate Virginia Adjusted Gross Income**STEP 1 - Determine Separate Federal Adjusted Gross Income**

	You	Spouse
1. Wages, salaries, etc. 1		4624.
2. Taxable interest and dividend income 2	69905.	550.
3. Taxable refunds, adjustments or offsets of state and local income tax 3	2816.	2817.
4. Business income 4	-13745.	-4799.
5. Capital gains/losses and other gains/losses 5	238546.	169043.
6. Taxable pensions, annuities and IRA distributions 6	10176.	
7. Rents, royalties, partnerships, estates, trusts, etc. 7	NONE	NONE
8. Other income (Farm Income, taxable social security, etc.) 8		
9. Gross income - add Lines 1 through 8 9	307698.	172235.
10. Adjustments to gross income 10	NONE	4000.
11. FAGI-subtract Line 10 from Line 9 11	307698.	168235.

(The total of both columns should equal your joint FAGI reported on your 1040, 1040A or 1040EZ)

STEP 2 - Determine Separate Virginia Adjusted Gross Income

	You	Spouse
12. Total additions to FAGI (Form 760, Line 2) 12	7.	
13. Sub-total - add Lines 11 and 12 13	307705.	168235.
14. Age Deduction (Form 760, Line 4) 14		
15. Social Security Act and Tier 1 Railroad Retirement Act Benefits (Form 760, Line 5) 15		
16. State income tax refund or overpayment credit reported as income on your federal return (Form 760, Line 6) 16	2816.	2817.
17. Other Subtractions (Form 760, Line 7) 17	2000.	2000.
18. Total Subtractions from FAGI - add Lines 14, 15, 16, and 17 18	4816.	4817.
19. Subtract Line 18 from Line 13. These are your separate VAGI amounts to be used on Line 1 of the Spouse Tax Adjustment Worksheet 19	302889.	163418.

(The total of both columns should equal your combined VAGI reported on Line 9 of your 760)

Enter VAGI amounts here
and on Form 760, Line 16a & 16b

**2006
Schedule CR****CREDIT COMPUTATION SCHEDULE - See Page 6 for required attachments.
Attach this to your return. See instructions for other required attachments.**

ANDREW COHEN & RITA COHEN

PART I - MAXIMUM NONREFUNDABLE CREDITS

- 1 Enter the total tax computed on your return less the total of Spouse Tax Adjustment, Credit for Low Income Individuals or VA Earned Income Credit and Credit for Tax Paid to Another State. The maximum nonrefundable credits allowable on line 107 of Schedule CR may not exceed this amount. 1

25326.

PART II - ENTERPRISE ZONE ACT CREDIT

- 2 Credit allowable this year from Form 301 (attach Form 301) 2

PART III - NEIGHBORHOOD ASSISTANCE ACT CREDIT

- 3 Authorized amount of Neighborhood Assistance Act Credit 3 _____
4 Carryover credit from prior year(s) [attach computation] 4 _____
5 Add line 3 and line 4 5 _____

- 6 Credit allowable this year: Line 5 or balance of maximum credit available, whichever is less 6
7 Carryover credit to next year: Line 5 less line 6 (applicable only if within 5 year carryover period) 7 _____

PART IV - RECYCLABLE MATERIALS PROCESSING EQUIPMENT CREDIT

- 8 Enter 10% of qualifying recyclable equipment cost 8 _____
9 Carryover credit from prior year(s) [attach computation] 9 _____
10 Add line 8 and line 9 10 _____
11 Enter 40% of tax per return 11 _____
12 Maximum recyclable materials processing equipment credit. Line 9 or line 11, whichever is less 12 _____
13 Credit allowable this year: Line 12 or balance of maximum credit available, whichever is less 13
14 Carryover credit to next year: Line 9 less line 13 (applicable only if within 10 year carryover period) 14 _____

PART V - CONSERVATION TILLAGE EQUIPMENT CREDIT

- 15 Enter 25% of qualifying property cost or \$4,000, whichever is less . . . 15 _____
16 Carryover credit from prior year(s) [attach computation] 16 _____
17 Add line 15 and line 16 17 _____
18 Credit allowable this year: Line 17 or balance of maximum credit available, whichever is less 18
19 Carryover credit to next year: Line 17 less line 18 (applicable only if within 5 year carryover period) 19 _____

PART VI - FERTILIZER AND PESTICIDE APPLICATION EQUIPMENT CREDIT

- 20 Enter 25% of current qualifying equipment cost or \$3,750, whichever is less 20 _____
21 Carryover credit from prior year(s) [attach computation] 21 _____
22 Add line 20 and line 21 22 _____
23 Credit allowable this year: Line 22 or balance of maximum credit available, whichever is less 23
24 Carryover credit to next year: Line 22 less line 23 (applicable only if within 5 year carryover period) 24 _____

PART VII - RENT REDUCTION PROGRAM CREDIT

- 25 Enter 50% of qualifying rent reductions 25 _____
26 Carryover credit from prior year(s) [attach computation] 26 _____
27 Add line 25 and line 26 27 _____
28 Credit allowable this year: Line 27 or balance of maximum credit available, whichever is less 28
29 Carryover credit to next year: line 27 less line 28 (applicable only if within 5 year carryover period) 29 _____

Schedule CR (2006) page 2

Pg 77 of 94

See Page 6 for required attachments.



ANDREW COHEN & RITA COHEN

PART VIII - CLEAN-FUEL VEHICLE AND VEHICLE EMISSIONS TESTING EQUIPMENT**Clean-fuel vehicle and qualified electric vehicle credit**

30a **NO LONGER APPLICABLE** 30a XXXXXX

30b **Qualifying Electric Vehicle** -Enter 10% of the cost used to
compute the credit under IRC § 30 for qualified electric vehicles . . . 30b _____

30c **NO LONGER APPLICABLE** 30c XXXXXX

31 Carryover credit from prior year(s) [attach computation] 31 _____

32 Add lines 30b and 31 32 _____

33 Line 32 or balance of maximum credit available, whichever is less 33 _____

34 Carryover credit to next year: Line 32 less line 33 (applicable only
if within 5 year carryover period) 34 _____

Vehicle emissions testing equipment credit

35 Enter 20% of the purchase or lease price paid during the year for
qualified vehicle emissions testing equipment 35 _____

36 Carryover credit from prior year(s) [attach computation] 36 _____

37 Add line 35 and line 36 37 _____

38 Enter the amount from line 37 or the balance of maximum credit
available, whichever is less 38 _____

39 Carryover credit to next year: Line 37 less line 38 (only if within
5 year carryover period) 39 _____

PART IX - MAJOR BUSINESS FACILITY JOB TAX CREDIT

40a **Credit authorized by the Department of Taxation** 40a _____

40 **Credit allowable this year:** Line 40a or the balance of the maximum
credit available, whichever is less 40 _____

41 Carryover credit to next year. Compute on Form 304 if within the 10 year
carryover period (Line 40 less Line 40a) 41 _____

PART X - FOREIGN SOURCE RETIREMENT INCOME TAX CREDIT

42 Qualifying taxable income on which the tax in the foreign
country is based 42 _____

43 Virginia taxable income.
See instructions 43 449427.

44 Qualifying tax paid to the foreign country.
Enter name of country: _____ 44 _____

45 Virginia income tax. See instructions 45 25326.

46 Income percentage. Divide line 42 by line 43. Compute to one decimal
place, not to exceed 100%. For example, 0.3163 becomes 31.6% . . . 46 _____

47 Multiply line 45 by line 46 47 _____

48 **Credit allowable this year:** Enter the lesser of line 44 or line 47,
not to exceed the balance of maximum credit available 48 _____

PART XI - HISTORIC REHABILITATION TAX CREDIT

49 Enter the amount of eligible expenses (attach certificate) 49 _____

50 Multiply the amount on line 49 by 25% 50 _____

51 Carryover credit from prior year(s) [attach computation] 51 _____

52 Add line 50 and line 51 52 _____

53 **Credit allowable this year:** Enter the amount from line 52 or the
balance of maximum credit available, whichever is less 53 _____

54 Carryover credit to next year: Line 52 less
line 53. (10 year carryover period) 54 _____

Schedule CR (2006) page 3

See Page 6 for required attachments.



ANDREW COHEN & RITA COHEN

PART XII - DAY-CARE FACILITY INVESTMENT TAX CREDIT

55 Enter 25% of eligible expenses, not to exceed \$25,000 55 _____

56 Carryover credit from prior year(s) [attach computation] 56 _____

57 Add line 55 and line 56 57 _____

58 **Credit allowable this year:** Enter the amount from line 57 or the balance of maximum credit available, whichever is less 58 _____

59 Carryover credit to next year: Line 57 less line 58. (3 year carryover period. See instructions for limitations) 59 _____

PART XIII - LOW-INCOME HOUSING CREDIT

60 Enter allowable credit (attach certification form) 60 _____

60a Carryover credit from prior year(s) [attach computation] 60a _____

60b Add line 60 and line 60a 60b _____

61 **Credit allowable this year:** Enter amount from line 60b or the balance of maximum credit available, whichever is less 61 _____

62 Carryover credit to next year: Line 60b less line 61 (5 year carryover period) 62 _____

PART XIV - AGRICULTURAL BEST MANAGEMENT PRACTICES TAX CREDIT

63 Enter 25% of qualified expenditures, not to exceed \$17,500 (attach certificate) 63 _____

64 Carryover credit from prior year(s) [attach computation] 64 _____

65 Add line 63 and line 64 65 _____

66 **Credit allowable this year:** Enter amount from line 65 or the balance of maximum credit available, whichever is less 66 _____

67 Carryover credit to next year: Line 65 less line 66. (5 year carryover period.) 67 _____

PART XV - QUALIFIED EQUITY AND SUBORDINATED DEBT INVESTMENTS TAX CREDIT

68 Enter the amount of qualified equity and subordinated debt investments tax credit authorized by the Virginia Department of Taxation 68 _____

69 Carryover credit from prior year(s) [attach computation] 69 _____

70 Add line 68 and line 69 70 _____

71 **Credit allowable this year:** Enter the amount on line 70 or the balance of maximum credit available, whichever is less 71 _____

72 Carryover credit for 2007: Line 70 less line 71 (15 year carryover period) 72 _____

PART XVI - WORKER RETRAINING TAX CREDIT

73 Enter amount of worker retraining tax credit authorized by the Virginia Department of Taxation. 73 _____

74 Carryover credit from prior year(s) [attach computation] 74 _____

75 Add line 73 and line 74 75 _____

76 **Credit allowable this year:** Enter the amount from line 75 or the balance of maximum credit available, whichever is less 76 _____

77 Carryover credit to next year: Line 75 less line 76 (3 year carryover period) 77 _____

PART XVII - WASTE MOTOR OIL BURNING EQUIPMENT CREDIT

78 Enter 50% of the purchase price paid during the taxable year for equipment used exclusively for burning waste motor oil at your facility 78 _____

79 **Credit allowable this year:** Enter the amount from line 78, up to \$5,000 not to exceed balance of maximum credit available 79 _____

Schedule CR (2006) page 4

Pg 79 of 94

See Page 6 for required attachments.



ANDREW COHEN & RITA COHEN

PART XVIII - CREDIT FOR PURCHASE OF LONG-TERM CARE INSURANCE

80 Enter the amount premium paid in 2006 80 _____ Date policy issued
(must be on or after 1/01/2006)
80a Multiply line 80 by 15% (.15) 80a _____ **You -** _____ 2006
81 Enter carryover from prior year(s) [attach computation] **NOT VALID UNTIL 2007** **Spouse -** _____ 2006
82 Add lines 80a and 81 82 _____
83 **Credit allowable this year:** Enter the amount on Line 82 or balance
of maximum credit available, whichever is less 83
84 Carryover credit to next year: Line 82 less Line 83
(5 year carryover period) 84 _____

PART XIX - CREDIT EXPIRED - SPACE RESERVED FOR FUTURE USE

85 Reserved 85 _____
86 Reserved 86 _____
87 Reserved 87 _____
88 Reserved 88
89 Reserved 89 _____

PART XX - HOME ACCESSIBILITY FEATURES FOR THE DISABLED TAX CREDIT

90 Enter the amount of the Home Accessibility Features for the Disabled
tax credit authorized by the Virginia Department of Taxation 90 _____
91 Carryover credit from prior year(s) [attach computation] 91 _____
92 Add line 90 and line 91 92 _____
93 **Credit allowable this year:** Enter the amount on line 92
or the balance of maximum credit available, whichever is less 93
94 Carryover credit to next year: line 92 less line 93
(5 year carryover period) 94 _____

PART XXI - RIPARIAN WATERWAY BUFFER CREDIT

95 Enter the amount of Riparian Waterway Buffer tax credit
authorized by the Virginia Department of Forestry (attach
certification) 95 _____
96 Carryover credit from prior year(s) [attach computation] 96 _____
97 Add line 95 and line 96 97 _____
98 **Credit allowable this year:** Enter the amount on line 97
or the balance of maximum credit available, whichever is less 98
99 Carryover credit to next year: Line 97 less line 98
(5 year carryover period) 99 _____

PART XXII - LAND PRESERVATION TAX CREDIT

100 Enter the credit amount originating in 2006 or the amount of
credit transferred to you in 2006 100 20000.
101 Carryover credit from prior year(s) [attach computation] 101 _____
101a Add line 100 and line 101 101a 20000.
101b Enter total credit transferred to others in 2006 101b _____
102 Subtract line 101b from line 101a 102 20000.

103 **Credit allowable this year:** Enter the amount from line 102
or the balance of maximum credit available, whichever is less.
Each credit holder cannot claim more than \$100,000 per credit. 103 20000.
104 Carryover credit to next year: line 102 less line 103
(5 year carryover period) 104 _____

Schedule CR (2006) page 5

Pg 80 of 94

See Page 6 for required attachments.



ANDREW COHEN & RITA COHEN

PART XXIII - POLITICAL CONTRIBUTIONS CREDIT

105 Enter 50% of the amount of eligible political contributions. Credit is limited to \$25 for individuals or \$50 for married filing jointly . . . 105 _____

106 **Credit allowable this year:** Enter the amount on line 105 or the balance of maximum credit available, whichever is less 106

PART XXIV - TOTAL NONREFUNDABLE CREDITS

107 Add lines 2, 6, 13, 18, 23, 28, 33, 38, 40, 48, 53, 58, 61, 66, 71, 76, 79, 83, 93, 98, 103, and 106. If you have claimed more than the maximum allowed nonrefundable credits, see instructions. 107

20000.

PART XXV - VIRGINIA COAL EMPLOYMENT AND PRODUCTION INCENTIVE and COALFIELD EMPLOYMENT ENHANCEMENT TAX CREDITS

108 100% Coalfield Employment Enhancement and/or Virginia Coal Employment and Production Incentive Tax Credits from Line 1 of your 2006 Schedule 306B 108

108a 50% Coalfield Employment Enhancement Tax Credit from line 2 of your 2006 Schedule 306B 108a

109 Full credit: Enter amount from your 2006 Form 306, line 12a 109

109a Full credit: Enter amount from your 2006 Form 306, line 12b 109a

110 85% Credit: Enter amount from your 2006 Form 306, Line 13a 110

110a 90% Coalfield Credit: Enter amount from your 2006 Form 306, Line 13b 110a

111 Total Coal Related Tax Credits allowable this year: Add lines 109, 109a, 110 and 110a 111

112 2006 Coalfield Employment Enhancement Tax Credit earned to be used when completing your 2009 return: Enter the amount from your 2006 Form 306, line 11 112

PART XXVI - TOTAL REFUNDABLE CREDITS

113 Refundable real property enterprise zone act credit from Form 301 113

114 Refundable total Coalfield Employment Enhancement and/or Virginia Coal Employment and Production Incentive Tax Credits from Line 111 114

115 Enter the total of line 113 and line 114 115

PART XXVII - TOTAL CURRENT YEAR CREDITS

116 Total credits allowable this year. Enter the total of line 107 and line 115 here and on line 23 of form 760, line 18g of form 760PY or line 19g of form 763 116

20000.

**760C - 2006 Underpayment of Virginia Estimated
Tax by Individuals, Estates and Trusts**

• Attach this form to Form 760, 763, 760PY or 770.

Fiscal Year Filers: Enter beginning date _____ 20 _____, ending date _____ 20 _____, and check here ☐

First Name, Middle Initial and Last Name (of Both if Joint) - OR - Name of Estate or Trust ANDREW COHEN & RITA COHEN	Your Social Security Number or FEIN [REDACTED]
If Estate or Trust, Name and Title of Fiduciary	Spouse's Social Security Number [REDACTED]
	Office Use SC [REDACTED]
	Office Use Payment [REDACTED]

Part I - Compute Your Underpayment

1. 2006 Income Tax Liability After Spouse Tax Adjustment and Nonrefundable Credits (If \$150 or less, you are not required to file Form 760C.)	1.	5,326.
2. Enter 90% of the Amount Shown on Line 1	2.	4,793.
3. 2005 Income Tax Liability After Spouse Tax Adjustment and Nonrefundable Credits	3.	16,942.
4. Enter the Amount From Line 2 or Line 3, Whichever is Less	4.	4,793.
5. Enter the Number of Installment Periods for Which You Were Liable to Make Payments	5.	4

Line 6 Through 14: Complete Each Line Across All Columns Before Continuing to Next Line

	A	B	C	D
6. Due Dates of Installment Payments	May 1, 2006	June 15, 2006	Sept. 15, 2006	Jan. 15, 2007
7. Tax Liability (Divide the amount on Line 4 by the number of installments reported on Line 5 and enter the result in the appropriate columns.)	1,198.	1,198.	1,198.	1,199.
8. Enter the Income Tax Withheld for Each Installment Period	14.	14.	14.	15.
9. Enter the Overpayment Credit From Your 2005 Income Tax Return	3,066.			
10. Enter the Amount of Any Timely Payment Made for Each Installment Period in the Appropriate Column (Do not enter any late payments.)		2,934.	3,000.	
11. Underpayment or [Overpayment] (Subtract Lines 8, 9 and 10 From Line 7. See instructions for overpayment.)	-1,882.	-1,750.	-1,816.	1,184.
12. Other Payments (Enter the payments from the Late Payment/Overpayment Table below, beginning with the earliest payment recorded. Do not enter more than the underpayment in any column.)				
	Date	Amount		
a. First Payment	/ /			
b. Second Payment	/ /			
c. Third Payment	/ /			
d. Fourth Payment	/ /			
13. Enter the Total Timely Payments Made as of Each Installment Due Date From Lines 8, 9, 10 and 12 (For ex., in Column A enter all payments made by May 1, 2006)	3,080.	2,948.	3,014.	15.
14. Subtract Line 13 From Line 7 (If the sum of all underpayments (do not include any OVERPAYMENTS) reported is \$150 or less, stop here; you are not subject to an addition to tax. If your underpayments total more than \$150, proceed to Part II.)				1,184.

Late Payment/Overpayment Table (See Instructions for Lines 11 and 12.)

Continued on Back ►

Date of Payment	Date of Payment	Date of Payment	Date of Payment
Payment Amount	Payment Amount	Payment Amount	Payment Amount
\$	\$	\$	\$

760C - 2006

Page 2



Part II - Exceptions That Void the Addition to Tax

		A	B	C	D
		May 1, 2006	June 15, 2006	Sept. 15, 2006	Jan. 15, 2007
15. Total Amount Paid and Withheld From January 1, 2006 Through the Installment Date Indicated		3,080.	6,028.	9,042.	9,057.
16. Exception 1: Prior Year's Tax (Multiply the 2005 tax by the percentage in each col.)	100% of 2005 Tax	25%	50%	75%	100%
	16,942.	4,236.	8,471.	12,707.	16,942.
17. Exception 2: Tax on Prior Year's Income Using the 2006 Rates and Exemptions (Multiply the 2005 tax by the percentage in each col.)	100% of Tax	25%	50%	75%	100%
	16,919.	4,230.	8,460.	12,689.	16,919.
18. Exception 3 Worksheet: Tax on Annualized 2006 Income (Use the formula below to compute the amount on lines 18a, b and c for each col.) Lines 18a, b and c: April 30 column: Multiply the actual amount for the period ended April 30, 2006, by 3. May 31 column: Multiply the actual amount for the period ended May 31, 2006, by 2.4. August 31 column: Multiply the actual amount for the period ended August 31, 2006, by 1.5.					
From January 1 to:		April 30	May 31	August 31	
a. Annualized Virginia Adjusted Gross Income (VAGI) for Each Period		466,307.	466,307.	466,307.	
b. Compute the Annualized Itemized Deductions Using the Formula Above OR Enter the Full Standard Deduction in Each Column If You Did Not Claim Itemized Deductions		13,280.	13,280.	13,280.	
c. Compute the Annualized Child and Dependent Care Expenses Deduction for Each Period					
d. TOTAL Dollar Amount of Exemptions Claimed on Your Return		3,600.	3,600.	3,600.	
e. Virginia Taxable Income (Subtract Lines 18b, c and d from Line 18a.)		449,427.	449,427.	449,427.	
f. Virginia Tax (Enter the Va. income tax on the amount(s) shown on line 18e above.)		25,585.	25,585.	25,585.	
g. Multiply Line 18f by the Percentage Shown for Each Period		22.5%	45%	67.5%	
		5,757.	11,513.	17,270.	
19. Exception 4 Worksheet: Tax on 2006 Income Over a 4, 5 and 8 Month Period* (* 3, 4 and 7 months for estates and trusts)					
From January 1 to:		April 30	May 31	August 31	
a. Enter Your Virginia Adjusted Gross Income (VAGI) for Each Period		155,436.	194,295.	310,871.	
b. Enter the Itemized Deductions Claimed for Each Period OR (If Greater) the Full Standard Deduction		4,427.	5,533.	8,853.	
c. Enter the Child and Dependent Care Expenses Deduction for Each Period					
d. Enter the Total Dollar Amount of Exemptions Claimed on Your Return		1,200.	1,500.	2,400.	
e. Virginia Taxable Income (Subtract Lines 19b, c and d from Line 19a.)		149,809.	187,262.	299,618.	
f. Virginia Tax (Enter the Va. income tax on the amount(s) shown on Line 19e above.)		8,357.	10,510.	16,971.	
g. Multiply Line 19f by 90% (.90) for Each Period		7,521.	9,459.	15,274.	

Note
Estates and trusts should use end dates of March 31, April 30 & July 31.**Note**
Exceptions 3 and 4 do not apply to the fourth installment period.

Part III - Compute the Addition to Tax

If an exception has been met (Part II) for any installment period, complete the column for that period as follows: write "Exception" and the exception number (1, 2, 3, or 4) on Line 20; skip Lines 21 through 23; and enter "0" on Line 24. For all other periods, complete each line as instructed below.

	A	B	C	D
	May 1, 2006	June 15, 2006	Sept. 15, 2006	Jan. 15, 2007
20. Amount of Underpayment From Line 14, Part I				1,184.
21. Date of Payment From Line 12, Part I (If no payments were entered on Line 12, enter the actual date of payment or May 1, 2007, whichever is earlier.)				
22. a. Number of Days After Installment Due Date Through Date Paid or June 30, 2006, Whichever Is Earlier (If June 30, 2006, is earlier, enter 60 and 15 respectively.)				
b. Number of Days After June 30, 2006, Through Date Paid or May 1, 2007, Whichever is Earlier (If May 1, 2007, is earlier, enter 305, 305, 228 and 106.)	107	107	107	
23. a. Multiply the Number of Days in Each Column on Line 22a by the Daily Rate .00024 (9% Per Annum)				
b. Multiply the Number of Days in Each Column on Line 22b by the Daily Rate .00027 (10% Per Annum)	0.02889	0.02889	0.02889	
c. Add Lines 23a and 23b in Each Column and Enter the Total Here	0.02889	0.02889	0.02889	
24. Multiply the Amount on Line 20 by Line 23c for Each Column				

25. Addition to Tax
(Total the amounts on Line 24. Enter here and on the "Addition to Tax" line on your income tax return.)

--

COHEN

ANDREW'S DREAMLAND, LLC

TD5204 -2YVG 04/09/2007 17:33:00 V06-5.4 7444

Part III Cost of Goods Sold (see page C-7)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42		

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ▶		
44	Of the total number of miles you drove your vehicle during 2006, enter the number of miles you used your vehicle for:		
a	Business	b Commuting (see instructions)	c Other
45	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
46	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
47 a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

AUDITION EXPENSES	230.
VOICE TRAINING	1,175.
SHEET MUSIC	100.
COSTUMES	632.
MAKE UP AND HAIR	933.
PICTURES	150.
PIANO ACCOMPANIEST	480.
PIANO TUNING	85.
PROFESSIONAL MAGAZINES, JOURNALS	70.
48 Total other expenses. Enter here and on page 1, line 27	48 3,855.

Schedule C (Form 1040) 2006

**SCHEDULE C
(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

OMB No. 1545-0074

2006Attachment
Sequence No. **09**Department of the Treasury
Internal Revenue Service (99)

► Attach to Form 1040, 1040NR, or 1041.

► See Instructions for Schedule C (Form 1040).

Name of proprietor

ANDREW COHEN

Social security number (SSN)

A Principal business or profession, including product or service (see page C-2 of the instructions)

RESIDENTIAL BUILDING CONSTRUCTION

B Enter code from pages C-8, 9, & 10

236100

C Business name. If no separate business name, leave blank.

ANDREW 'S DREAMLAND, LLC

D Employer ID number (EIN), if any

5

E Business address (including suite or room no.) ► 3940 MEETING HOUSE DRIVE

City, town or post office, state, and ZIP code VIRGINIA BEACH, VA. 23455

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2006? If "No," see page C-2 for limit on losses☒ Yes☐ No**H** If you started or acquired this business during 2006, check here**Part I Income**

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here	<input type="checkbox"/>	1	
2 Returns and allowances		2	
3 Subtract line 2 from line 1		3	
4 Cost of goods sold (from line 42 on page 2)		4	10,730.
5 Gross profit. Subtract line 4 from line 3		5	-10,730.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see page C-3)		6	
7 Gross income. Add lines 5 and 6		7	-10,730.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8		18 Office expense	18	
9 Car and truck expenses (see page C-4)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see page C-5):		
11 Contract labor (see page C-4)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	25.
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see page C-6)	24b	
17 Legal and professional services	17	2,810.	25 Utilities	25	
			26 Wages (less employment credits)	26	
			27 Other expenses (from line 48 on page 2)	27	180.

28 **Total expenses** before expenses for business use of home. Add lines 8 through 27 in columns

3,015.

29 Tentative profit (loss). Subtract line 28 from line 7

-13,745.

30 Expenses for business use of your home. Attach **Form 8829****31** **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040, line 12**, and **Schedule SE, line 2**, or on **Form 1040 NR, line 13** (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If a loss, you **must** go to line 32.

-13,745.

32 If you have a loss, check the box that describes your investment in this activity (see page C-6).

- If you checked 32a, enter the loss on both **Form 1040, line 12**, and **Schedule SE, line 2**, or on **Form 1040NR, line 13** (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see page C-7 of the instructions.

Schedule C (Form 1040) 2006

Part III Cost of Goods Sold (see page C-7)

33 Method(s) used to value closing inventory: a ☒ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☒ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	NONE
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs SEE STATEMENT 4	39	10,730.
40 Add lines 35 through 39	40	10,730.
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42	10,730.

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ►

44 Of the total number of miles you drove your vehicle during 2006, enter the number of miles you used your vehicle for:

a Business b Commuting (see instructions) c Other

45 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

46 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

47 a Do you have evidence to support your deduction? ☐ Yes ☐ No
b If "Yes," is the evidence written? ☐ Yes ☐ No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

AMORTIZATION	180.
48 Total other expenses. Enter here and on page 1, line 27	48 180.

**SCHEDULE E
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Supplemental Income and Loss**
(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

2006Attachment
Sequence No. **13**

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ See Instructions for Schedule E (Form 1040).

Name(s) shown on return

Your social security number

ANDREW COHEN & RITA COHEN

Part I Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of renting

Schedule C or C-EZ (see page E-3). Report farm rental income or loss from Form 4835 on page 2, line 40.

1 List the type and location of each rental real estate property:		2 For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:		Yes	No
A	B	C			
A			• 14 days or		
B			• 10% of the total days rented at fair rental value?		
C			(See page E-3.)		

Income:		Properties			Totals
		A	B	C	(Add columns A, B, and C.)
3 Rents received	3				3
4 Royalties received	4				4
Expenses:					
5 Advertising	5				
6 Auto and travel (see page E-4) . . .	6				
7 Cleaning and maintenance	7				
8 Commissions	8				
9 Insurance	9				
10 Legal and other professional fees . .	10				
11 Management fees	11				
12 Mortgage interest paid to banks, etc. (see page E-4)	12				12
13 Other interest	13				
14 Repairs	14				
15 Supplies	15				
16 Taxes	16				
17 Utilities	17				
18 Other (list) ▶	18				
19 Add lines 5 through 18	19				19
20 Depreciation expense or depletion (see page E-4)	20				20
21 Total expenses. Add lines 19 and 20	21				
22 Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file Form 6198	22				
23 Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23	()	()	()	
24 Income. Add positive amounts shown on line 22. Do not include any losses	24				
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25				()
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . . .	26				

For Paperwork Reduction Act Notice, see page E-7 of the instructions.

Schedule E (Form 1040) 2006

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

ANDREW COHEN & RITA COHEN

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations** **Note.** If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See page E-1.

- 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☐ Yes ☒ No
If you answered "Yes," see page E-6 before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	VIANIX LC	P			
B	ENVEST II LLC	P			
C					
D					

STMT 5 Passive Income and Loss		Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A	NONE			
B	NONE			
C				
D				
29a Totals	NONE			
b Totals				
30 Add columns (g) and (j) of line 29a			30	NONE
31 Add columns (f), (h), and (i) of line 29b			31	()
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below			32	NONE

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		
Passive Income and Loss		Nonpassive Income and Loss
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1
A		
B		
34a Totals		
b Totals		
35 Add columns (d) and (f) of line 34a		35
36 Add columns (c) and (e) of line 34b		36 ()
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below		37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see page E-7)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39	

Part V Summary

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	NONE
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and Schedule K-1 (Form 1041), line 14, code F (see page E-7)	42	
43 Reconciliation for real estate professionals. If you were a real estate professional (see page E-1), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Schedule E (Form 1040) 2006

SUPPLEMENT TO VIRGINIA FORM 760CG

=====

FEDERAL INCOME AND ADJUSTMENTS INFORMATION

WAGES, SALARIES, TIPS, ETC.	4,624.
TAXABLE INTEREST INCOME	2,816.
DIVIDEND INCOME	67,639.
TAXABLE REFUNDS OF STATE & LOCAL INCOME TAX	5,633.
BUSINESS INCOME (LOSS)	-18,544.
CAPITAL GAIN (LOSS)	407,589.
TAXABLE PENSIONS AND ANNUITIES	10,176.
PARTNERSHIP INCOME (LOSS)	NONE

TOTAL INCOME	479,933.
IRA DEDUCTION	4,000.

TOTAL ADJUSTMENTS TO INCOME	4,000.
FEDERAL ADJUSTED GROSS INCOME	-----
(FORM 760, LINE 1)	475,933.
	=====

SUPPLEMENT TO VIRGINIA FORM 760CG

=====

ADJUSTMENTS TO INCOME

OTHER SUBTRACTIONS FROM INCOME

33 VIRGINIA COLLEGE SAVINGS PLAN PAYMENTS	49000.
33 CARRYOVER TO NEXT YEAR	-47000.
33 VIRGINIA COLLEGE SAVINGS PLAN PAYMENTS	49000.
33 CARRYOVER TO NEXT YEAR	-47000.

TOTAL	4000.
	=====

SUPPLEMENT TO SCHEDULE C

GROSS RECEIPTS OR SALES - SCHEDULE C, LINE 1

BUSINESS NAME: RITA A. COHEN

PARAGON RAGTIME ORCHESTRA	2,500.
VIRGINIA ARTS FESTIVAL	1,000.

TOTAL TO SCHEDULE C, LINE 1	3,500.
-----------------------------	--------

CAR AND TRUCK EXPENSES - SCHEDULE C, LINE 9

STANDARD MILEAGE RATE METHOD

BUSINESS NAME: RITA A. COHEN

VEHICLE 1

BUSINESS MILES	4,455.
X	0.445

1,982.

STANDARD MILEAGE FOR THIS VEHICLE	1,982.
-----------------------------------	--------

TOTAL TO SCHEDULE C, LINE 9	1,982.
-----------------------------	--------

SUPPLEMENT TO SCHEDULE C

=====

OTHER COSTS - SCH. C PART III, LINE 39

=====

BUSINESS NAME: ANDREW'S DREAMLAND, LLC

ADDITIONAL BUILDING COSTS POST SALE 10,730.

TOTAL TO SCHEDULE C, LINE 39 10,730.

=====

SUPPLEMENT TO SCHEDULE E

PART II, INCOME OR LOSS FROM PARTNERSHIPS AND S CORPORATIONS
COLUMNS (F) & (G) - PASSIVE INCOME OR LOSS

K-1 NAME: VIANIX LC
ID NUMBER:

DESCRIPTION	INCOME/LOSS
ORDINARY INCOME OR LOSS	-10,233.
LESS:	
SUSPENDED LOSS CARRYOVER	6,231.
PLUS:	
DISALLOWED PASSIVE LOSS	16,464.
ALLOWABLE INCOME/LOSS	NONE

K-1 NAME: ENVEST II LLC
ID NUMBER:

DESCRIPTION	INCOME/LOSS
ORDINARY INCOME OR LOSS	-3,752.
OTHER RENTAL INCOME OR LOSS	-1,789.
LESS:	
OTHER	11.
NET INCOME/LOSS BEFORE LIMITATIONS	-5,552.
LESS:	
SUSPENDED LOSS CARRYOVER	2,703.
PLUS:	
DISALLOWED PASSIVE LOSS	8,255.
ALLOWABLE INCOME/LOSS	NONE